



## Direct Deposit Authorization Agreement

I hereby authorize \_\_\_\_\_  
(hereinafter "Company") and its payroll processor, Midwest Pay Link (MPL) to deposit any amounts owed me by initiating credit entries to my account at the financial institution (hereinafter "Bank") indicated below. Further, I authorize Bank to accept and to credit any credit entries indicated by Company to my account. In the event that Company or MPL deposits funds erroneously into my account, I authorize Company or MPL to debit my account for an amount not to exceed the original amount of the erroneous credit.

Name (please print) \_\_\_\_\_

Social Security # \_\_\_\_\_

Begin Deposit       Change Information       Cancel

Bank Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

**Checking** → Attach void check or bank specification sheet

I wish to deposit (check one)  \$ \_\_\_\_\_  \_\_\_\_\_% Net  Entire net pay

**Savings** → Attach bank letter or specification sheet

I wish to deposit (check one)  \$ \_\_\_\_\_  \_\_\_\_\_% Net  Entire net pay

This authorization is to remain in full force and effect until Company and Bank have received written notice from me of its termination in such manner as to afford Company and Bank a reasonable opportunity to act on it.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

(Please retain a copy for your files)