

EMPLOYEE AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT

I hereby authorize and request Check-Plus, herein Check-Plus, to make payment of any amounts owed to me by initiating credit entries to my account indicated below in the bank(s) named below, herein BANK, and I authorize and request BANK to accept any credit entries initiated by Check-Plus to such account and credit the same to such account without responsibility for the correctness thereof.

I also authorize and request Check-Plus to effect repayment to Check-Plus for amounts owed it because of a prior erroneous credit initiated to my account if prior to the initiation of the correction entry. Check-Plus will use its best and commercially reasonable efforts to correct any such error within a reasonable amount of time; the correcting entry will also be transmitted to BANK, and will notify when that correction has been requested.

It is understood that this agreement may be terminated by me at any time by written notification to Check-Plus. Any such notification to Check-Plus shall be effective only with respect to entries initiated by Check-Plus after receipt of such notification and a reasonable opportunity to act on it.

I recognize, acknowledge and accept that this service is being provided for my convenience. As such, I agree to hold Check-Plus, each participating bank, and NACHA harmless from any claim incident to the operation of this plan arising from any act or omission by Check-Plus including, without limitation, and claim based on alleged loss as a result of non-credit of any deposit, and any claim which may be made by me as a result of the rejection of any debits of insufficient funds arising from the failure to credit deposits to my account.

***** ATTACH A VOIDED CHECK TO THIS FORM FOR ALL CHECKING ACCOUNTS*****

(This will not be processed without a voided check)

Company Name: _____ Client No. _____

Name (Please Print): _____ Social Security #: _____

I do not elect direct deposit or wish to cancel all my direct deposits (Check here and sign below).

I authorize direct deposit into the following accounts ONLY (any previous form(s) submitted will be void).

	Direct Deposit #1	Direct Deposit #2	Direct Deposit #3	Direct Deposit #4
Account Type <small>(check one)</small>	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Bank Name				
Routing Number				
Account Number				
Deposit % of net pay each pay period	% <input type="checkbox"/> Remainder	% <input type="checkbox"/> Remainder	% <input type="checkbox"/> Remainder	% <input type="checkbox"/> Remainder
Deposit up to this amount of net pay each pay period <small>(Leave blank if using %)</small>	\$	\$	\$	\$

Signature: _____ Date: _____