

Direct Deposit Authorization Form

We are pleased to offer you a new payday convenience – Direct Deposit. Now you can have your paycheck automatically deposited in your checking or savings account on payday. And you don't have to change your present banking relationship to take advantage of this service.

Direct Deposit will help you in many ways:

- It saves you trips to your financial institution.
- It saves you time in depositing checks – no long payday lines to wait in.
- It eliminates the possibility of lost, stolen or forged checks.
- Your money is deposited faster – reduces the possibility of overdrafts.
- You get your money deposited into your account even if you're on vacation or away from the office on business or illness.

Here's how the Direct Deposit works:

On payday you will receive an earnings statement showing gross salary, taxes, other deductions, and net pay. Your money will already have been deposited in your account. The amount of the deposit will appear on your bank statement, paper and online.

We believe you will like the added convenience of having your net pay automatically deposited for you.

Direct Deposit is safe, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to your company's payroll department.

The authorization form, which is provided on the bottom of this page, gives your employer the authority to deposit your pay to your account. Simply complete the form in order to take advantage of Direct Deposit.

All you need to do is:

- 1) Indicate whether your payment will be deposited in your checking or savings account by marking the box to the left of the account type.
- 2) Fill in your name, financial institution name and location, and today's date.
- 3) Attach a voided check for verification of all financial institution information. If you are unable to attach a voided check, please fill in your bank account number and routing number.

Note: Be sure to sign the form!

Please complete the information below.

I authorize PA Child to initiate electronic credit entries each pay period,
(Insert company name)
and if necessary, debit entries and adjustments for any credit entries in error to my:

Checking Account

Savings Account

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing.

Date _____

FINANCIAL INSTITUTION NAME (PLEASE PRINT) _____

FINANCIAL INSTITUTION ROUTING NUMBER _____

ACCOUNT NUMBER AT FINANCIAL INSTITUTION _____

FINANCIAL INSTITUTION CITY AND STATE _____

SIGNATURE _____