



# Rock Coast Personnel Direct Deposit Form

This document must be signed by employees requesting automatic deposit of paychecks and will be retained by Rock Coast Personnel.

*(Employees are encouraged to attach a voided check or direct deposit sheet from their bank for each of their accounts to help verify their account numbers and bank routing numbers.)*

## **Account Number 1**

Percentage or dollar amount to be deposited to this account: \_\_\_\_\_

Type:  Checking     Savings

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

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

## **Account Number 2 (Optional)**

(Remainder to be deposited to this account.)

Type:  Checking     Savings

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

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

This authorizes Rock Coast Personnel to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my account(s) indicated on this form and to other accounts I identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries. I agree that the ACH transactions authorized herein shall comply with all applicable U.S. Law. This authorization will be in effect until the company received a written termination notice from myself and has a reasonable opportunity to act upon it.

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

Printed Name: \_\_\_\_\_