

# Northwest Staffing Resources Direct Deposit Authorization

A voided check must be provided for each account. No guarantee can be made if numbers are written in.

<input type="checkbox"/>	New Direct Deposit
<input type="checkbox"/>	Add or Change Existing Direct Deposits
<input type="checkbox"/>	Stop All Direct Deposits effective _____

Employee ID	Employee Name - Please Print		
Effective Date	Financial Institution Name/City/State		
Deposit Full Amount <input type="checkbox"/> Yes <input type="checkbox"/> No	Bank ID (Routing) Number	Account Number	Checking <input type="text"/> Savings <input type="text"/>
Effective Date	Financial Institution Name/City/State		
Indicate Deposit Amount or %	Bank ID (Routing) Number	Account Number	Checking <input type="text"/> Savings <input type="text"/>
Effective Date	Financial Institution Name/City/State		
Indicate Deposit Amount or %	Bank ID (Routing) Number	Account Number	Checking <input type="text"/> Savings <input type="text"/>

I authorize Northwest Staffing Resources and my financial institution indicated above to initiate electronic credit entries (direct deposit) of the amounts designated and if necessary, debit entries and adjustments for any credit entries made in error to my accounts as I indicated above. I understand that the actual date of my first direct deposit may be later than the date indicated on this form, due to processing time by any and all financial institutions. This authority is to remain in effect until either I revoke it by giving 10 days prior written notice, or in the case of payroll deposits, upon termination of my employment.

I understand I will not receive paper documentation of my direct deposit, but that I can view this information on line via Web Center. Upon request, I may be provided with paper documentation.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date Authorization Filled Out