

Payroll Solutions, Inc.

EMPLOYEE AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT

Employee Name _____

Client Name _____

Social Security # _____

Client ID _____

New Account _____ Change Account _____

Federal ID # _____

I hereby authorize and request the COMPANY to make payment of any amount owing to me by initiating credit entries to my account indicated below, hereinafter called BANK, and I authorize and request BANK to accept any credit entries initiated by COMPANY to such account and to credit the same to such account without responsibility for the correctness thereof.

I also authorize and request COMPANY to effect repayment to COMPANY for amounts owed it because of a prior erroneous credit initiated to my account if prior to the initiation of the correcting entry. The COMPANY has sent or delivered to me written notice of the corrections and the reason therefore; and the correcting entry is transmitted in such time as to be delivered or made available to BANK before midnight of the tenth day following settlement for the erroneous entry.

It is understood that I may terminate this agreement at any time by written notification to COMPANY. Any such notification to COMPANY shall be effective only with respect to entries initiated by COMPANY 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 the COMPANY, Payroll Solutions, Inc., each participating BANK and NACHA harmless from any claim incident to the operation of this plan arising from any act or omission by the COMPANY or Payroll Solutions, Inc. including, without limitation, any claim based on alleged loss as a result of non-credit of any deposit, and any claim which may be by me as a result of the rejection of any debits because of insufficient funds arising from the failure to credit to my account.

Please attach a voided check here.
Deposit slips are not acceptable.

For Savings Account deposits, please contact your local bank and ask them for a letter on bank letterhead stating the account number, and routing & transit number.

Deposit Options:

Checking

____ Deposit Entire Net Pay Amount

____ Deposit \$ _____ Per Pay Period

____ Deposit _____ Per Pay Period

Savings

____ Deposit Entire Net Pay Amount

____ Deposit \$ _____ Per Pay Period

____ Deposit _____ Per Pay Period

Employee Signature _____ *Date* _____