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DIRECT DEPOSIT

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

Type of Account:  Checking  Savings

Account Number: 

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Routing Number: 

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Financial Institution: \_\_\_\_\_

Amount To Be Deposited:  100% of Paycheck

Fixed Amount \$ \_\_\_\_\_  Remaining Balance

Type of Account:  Checking  Savings

Account Number: 

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Routing Number: 

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Financial Institution: \_\_\_\_\_

Amount To Be Deposited:  100% of Paycheck

Fixed Amount \$ \_\_\_\_\_  Remaining Balance

Attach either a "VOID" check or a deposit slip for this account. This form will be used for the ABA coding numbers needed to activate the Direct Deposit. You should contact your ACH department for your institutions routing number.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_