



TEMPORARY SERVICES. FULL-TIME SOLUTIONS.

Authorization Agreement For Direct Deposit

Fax to Personnel Plus

303-694-6098

5299 DTC Blvd, Suite 280
Greenwood Village, CO 80111
PH: 303.694.6233

I hereby authorize Personnel Plus, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account; and to credit and/or debit the same to such account. **I understand that direct deposit is subject to an initial "pre-note" and that my first paycheck following the receipt of this form by Personnel Plus will be a live check.** My account and Bank information are indicated below:

Bank Name: _____

(Please check only one for type of account and indicate dollar amount or % of check to be deposited)

Checking: _____ Savings: _____ Other: _____

Transit/ABA No.: _____ Account No.: _____

This authority is to remain in full force and effect until Personnel Plus has received written notification from me of its termination in such time and in such manner as to afford Personnel Plus and my Bank a reasonable opportunity to act on it.

Employee Name (please print): _____

E-mail Address: _____

Signature: _____ Date: _____

**Please attach a voided check for Checking Account deposits
and a deposit slip for Savings Account deposits.**