

AUTHORIZATION FOR DIRECT DEPOSIT - EMPLOYEE FORM



This authorizes **The American Baptist Churches of Massachusetts DBA Grotonwood Camp** To send credit entries (and appropriate debit and adjustment entries), electronically or by other commercially accepted method, to my (our) account(s) indicated below and to other accounts I (we) identify in the future (the account). This authorizes the financial institution holding the Account to post such entries.

Account #1

Account #1 type (check one) Checking Saving

Employee Bank Name _____

Bank Routing # (ABA#) _____ Account # _____

Percentage or Dollar Amount to be deposited to This Account _____

Account #2 (remainder to be deposited to this account)

Account #2 type (check one) Checking Saving

Employee Bank Name _____

Bank Routing # (ABA#) _____ Account # _____

Please attach a voided check for each account here.

This authorization will be in effect until the Company receives a written termination notice from myself and has a reasonable opportunity to act on it.

Signature _____ Print Name Here _____

Email for pay stubs to be sent _____ Date _____

Important: This document must be signed by the employees requesting automatic deposit of paychecks and retained on file by the employer. Do not send tis form to Intuit. Employees must attach a voided check for each of their accounts to help verify their account numbers and bank routing numbers.

Employee: Please fill out and return to your employer.

Employer: Please save for your files only.