



Direct Deposit Authorization. Complete the bank information and sign the authorization statement to take advantage of direct deposit's safety, dependability, and convenience. It is crucial to complete this form accurately, and a sample check has been included to assist you in finding the required information. Any incorrect information will delay payment for up to 1 pay period.

YOUR NAME 123
 678 Main Street
 Anywhere, MI 12345

DATE _____

PAY TO THE ORDER OF _____ \$ _____
 _____ DOLLARS

⑆999888 7??
⑆00 123456789
⑆ 123

Routing Number
Account Number
Check Number

Bank Name _____ City _____ State _____
 Bank Phone Number _____ ACH Routing Number _____
 Account Number _____
 Verify Account Number _____
 Account Type: Checking _____ Savings _____

I hereby authorize Kinetic Personnel Group (here in after "Company") to deposit to my account any amount owed to me for wages by initiation of credit entries at the financial institution (hereinafter "Bank") handling my choice indicated above. Further, I authorize Bank to accept and credit any credit entries initiated by the Company to my account. If the Company erroneously deposits funds into my account, I authorize the Company to debit my account for an amount not to exceed the original amount of the erroneous credit. This authorization is to remain in full force and effect until Company receives written notice from me of its termination in such time and in such a manner as to afford a reasonable opportunity to act on it.

Employee Signature _____ Date _____
 Employee Name _____
 Last 4 Digits of SSN _____
 Employee Address _____
 City _____ State _____ Zip Code _____
 Email address _____

Direct deposit recipients will receive pay stubs via email. Pay days are on Friday; paystubs are emailed no later than Thursday. Please review your paystub for accuracy, if there are any discrepancies contact our office immediately.