



## Direct Deposit Authorization Form

Company ID# : \_\_\_\_\_ Company Name : \_\_\_\_\_

Employee ID# : \_\_\_\_\_ Employee Name : \_\_\_\_\_

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A/D/C	Priority	Checking Transit Number		Personal Account Number (s)	% / F	Amt / Net
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

A/D/C	Priority	Savings Transit Number		Personal Account Number (s)	% / F	Amt / Net
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

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\*\*\* Include Appropriate Voided Check \*\*\*

I authorize Harpers Data Services, Inc. and the financial institution above to initiate EFT transactions as instructed above

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