



**AUTHORIZATION AGREEMENT  
FOR AUTOMATED DEPOSITS (Direct Deposit)**  
Please submit a separate form for each bank account

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

Company/Client Name  
\_\_\_\_\_

Soc Sec # (last 4 digits):    -   -

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

Bank Transit # :

Account # :

Account Type :  Checking  Savings

Deposit Calculation :  Balance of Net Pay (always use this when depositing to only one account)

Flat \$ Amount Per Check \$    ,    .

% of Net Pay   %

I hereby authorize Teamworks to make electronic deposits of any amounts owing to me by initiating credit entries to the bank account designated herein. I also give Teamworks' limited authorization to initiate debits against this account only when necessary to correct credits issued to this account in error. This authorization will remain in effect until either changed or revoked by me in writing. Such written notice must be received by Teamworks with a reasonable time to act upon it. Teamworks reserves the right to suspend the use of direct deposit and issue in its stead a standard payroll check.

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

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

**Please Attach a Blank, Voided Check Here  
(No Deposit Slips)**