



Authorization Agreement for Automatic Payroll Deposits

Employee Information			
Your Name	_____		
Address	_____		
City	State	Zip	_____

Financial Institution Information			
Financial Institution Name	_____		Bank Routing # _____
Address	_____		Account # _____
Bank Phone Number	_____	Checking	Savings
			Deposit Amount \$ _____
(Enter "NET" to deposit entire paycheck or remainder of check)			

Additional Deposit Account			
Financial Institution Name	_____		Bank Routing # _____
Address	_____		Account # _____
Bank Phone Number	_____	Checking	Savings
			Deposit Amount \$ _____

Additional Deposit Account			
Financial Institution Name	_____		Bank Routing # _____
Address	_____		Account # _____
Bank Phone Number	_____	Checking	Savings
			Deposit Amount \$ _____

Authorization	
<p>I hereby authorize <i>Badger Swimpools</i> to deposit my payroll earning into the account(s) listed above and if necessary, debit entries or adjustments for any deposits made in error to my account. This authority is to remain in full force and effect until written notice from me has been received by <i>Badger Swimpools</i> in such a manner as to afford reasonable time to act on it.</p>	
Signature _____	Date _____

Please attach a copy of a voided check for checking accounts and/or a copy of a deposit ticket for savings accounts.