

DIRECT DEPOSIT AUTHORIZATION FORM

I (we) hereby authorize Southwest Conservation Corps to initiate credit entries for payroll to my (our) account indicated below and the financial institution named below to credit the same account to such amount. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Primary Account (Deposit Net Pay)

Financial Institution _____
Branch

Address City, State, Zip Code

Routing Number Account Number

Circle Account Type: Checking Savings

This authority is to remain in full force and effect until Southwest Conservation Corps has received written notification from me (or either of us) of its termination in such time and manner as to afford Southwest Conservation Corps and the financial institution a reasonable opportunity to act on it.

Print Name _____
Email Address (where paystubs will be sent)

Signature _____
Date

**ATTACH A VOIDED CHECK TO THIS FORM
(REQUIRED)**

If you do not have checks, you must obtain a letter from your financial institution stating your routing and account number. No exceptions.