



## Employee Direct Deposit Authorization

### Instructions

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Employee: Fill out and return to your employer.

Employer: Save for your files only.

This document must be signed by employees requesting automatic deposit of paychecks and retained on file by the employer. Employees must attach a voided check for each of their accounts to help verify their account numbers and bank routing numbers.

**Account 1 type:**  Checking  Savings

**Bank routing number (ABA number):** \_\_\_\_\_

**Account number:** \_\_\_\_\_

ATTACH A VOIDED CHECK HERE

### Authorization

This authorizes **JTC SERVICES GUAM, LLC** to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my account indicated below. This authorizes the financial institution holding the Account to post all such entries. I agree that the ACH transactions authorized herein shall comply with all applicable U.S. Law. This authorization will be in effect until the Company receives a written termination notice from myself and has a reasonable opportunity to act on it.

**Authorized signature:** \_\_\_\_\_ Employee ID #: \_\_\_\_\_

Print name: \_\_\_\_\_ Date: \_\_\_\_\_