DIRECT DEPOSIT AUTHORIZATION

Please print and complete ALL the information below.

Name:	
Address:	
City, State, Zip:	
John Jones 124 Main Street Anywhere, MA 02345 Pay to the erder of: Odlight Account Check Routing Number Number Number (1-17 digits) (do not include)	0259 Call 48
Name of Bank:	
Account #: 9-Digit Routing #:	
Type of Account:	heck One)
Attach a voided check for each bank account to which funds should be	deposited (if necessary)
Whiz Kids Tutoring [Company Name] is hereby authorized to di	irectly deposit my pay to
the account listed above. This authorization will remain in effect until writing.	I modify or cancel it in
Employee's Signature:	
Date:	

