

## **DIRECT DEPOSIT ENROLLMENT FORM**

ACCOUNT INFORMATION			
You may choose up to two accounts. Your last account <u>must</u> be for the remaining amount owed to you.			
A			
ABank Name/City/State	Routing/Transit		Account Number
☐ Checking ☐ Savings			
I wish to deposit	·	or%	(Choose Only One).
В			
Bank Name/City/State	Routing/Transit		Account Number
Checking Savings			
I wish to deposit  Entire Net Amount Remainder From Above.			
you the routing/transit number for your account. It isn't always the same as the number on the savings deposit slip. Please return to the Data Resource Group payroll department.  Check below, as applicable:			
Begin Deposit	Change Information	ı	Cancel My Direct Deposit
I hereby authorize my employer, Data Resource Group, LLC, to deposit any amounts owed me by initiating credit entries to my account at each financial institution (hereinafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any entries by Data Resource Group, LLC, to my accounts. In the event that Data Resource Group, LLC, deposits funds erroneously into my account, I authorize Data Resource Group, LLC, to debit my account for an amount not to exceed the original amount of the erroneous credit.			
This authorization is to remain in full force and effect until Data Resource Group, LLC, and Bank have received written notice from me of its termination in such time and such manner as to afford Data Resource Group, LLC, and Bank reasonable opportunity to act on it.			
Employee Name			
Signature		Da	ite

Below is a sample check MICR line, detailing where the information necessary to complete this form can be found.

