

Direct Deposit Form

Name: _____

First Paydate: _____

I authorize Integrity Staffing Group, Inc. to adjust the funds of my paycheck(s) as follows:

1. Please list your bank(s) below:

Account 1: _____ Phone# _____
Where Checking/Savings Account is Located

Account 2: _____ Phone# _____
Where Checking/Savings Account is Located

Account 3: _____ Phone# _____
Where Checking/Savings Account is Located

2. Please indicate the deposit amount below:

Account 1: Total amount or remaining balance deposited into account 1 or \$_____ deposited to account 1.

Account 2: Total amount or remaining balance deposited into account 2 or \$_____ deposited to account 2.

Account 3: Total amount or remaining balance deposited into account 3 or \$_____ deposited to account 3.

3. Please complete your account and bank routing numbers below: *(Please call your bank directly and verify your account and routing numbers. Although both numbers appear on your check, they are not always correct. Your bank routing number must be 9 digits.)* Also indicate if the account is a checking or savings account.

Account 1: _____ Account Number
 Checking
 Savings _____ Bank Routing Number

Account 2: _____ Account Number
 Checking
 Savings _____ Bank Routing Number

Account 3: _____ Account Number
 Checking
 Savings _____ Bank Routing Number

I agree to the above request, and I will notify you in writing of any change and/or request.

Employee Signature: _____

Date: _____

Live checks are not allowed under ISG standard employee conditions. A live check requires the prior approval of the President. Live checks will only be allowed for a short period of time until bank accounts can be established.

Requesting Live Check - Provide Approval Letter