

## Event Services, LLC

### Authorization Agreement for Direct Deposit

I hereby authorize Event Services, LLC to initiate credit entries or, if necessary, debit entries for any credit error to the following bank account:

Check One: Checking \_\_\_\_\_ Savings \_\_\_\_\_

Bank Name: \_\_\_\_\_

ABA / Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Amount:  
Specify \$ amount or ALL—  
no percentages. \_\_\_\_\_

Employee Name Printed: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE:** Your account will be tested on the first pay date following receipt of this authorization. A paper check will still be issued. A live deposit will occur on the pay date following the test. **It is your responsibility to notify your supervisor or payroll personnel of any changes to your account information.**

Attached VOIDED CHECK here (deposit slips cannot be accepted):

Admin Use Only Pre-note date: \_\_\_\_\_

Live deposit date: \_\_\_\_\_