



4400 N 32nd Street, Suite 105
Phoenix, AZ 85018
(602)553-8300 phone
(602)553-8308 fax

DIRECT DEPOSIT AUTHORIZATION

I hereby authorize OneSource Employer Services to direct deposit my paycheck in the following manner:

| Name of Bank or Credit Union | Checking or Savings | Dollar Amount or % of Net Pay |
|---------------------------------|------------------------|----------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

For Checking, please attach a voided check

For Savings, please attach documentation from your bank that includes the routing and account numbers

Request for direct deposit will not be considered without the appropriate documentation from your financial institution

Employee Name (please print)

Employee Signature

Date