## Direct Deposit Authorization (See Instructions on reverse side)

Employee Name:	Social Security No:
□ Salary Employee □ Hourly Employee	Work Location:
Option 1 – Deposit Into One Accou	Int
Please deposit my <u>entire net pay</u> (1009	%) directly into the account listed below.
Type of Account:	ngs
Name of Financial Institution	Bank Routing No
Street Address	
City, State, Zip Code	Bank Account No.
Phone Number ()	
Option 2 – Deposit Into More Than	One Account
Type of Account 1:  Checking	□ New Account □ Change Amount □ Cancel Account
□ Savings	
Name of Einangial Institution	Deposit Amount Per Pay \$
Name of Financial Institution Street Address	
City, State, Zip Code	
Phone Number ()	Bank Account No.
Type of Account 2:	□ New Account □ Change Amount □ Cancel Account
□ Savings	
	Deposit Amount Per Pay \$
Name of Einanoial Institution	Deposit Remaining Balance (Net Pay)
Name of Financial Institution	
Street Address City, State, Zip Code	
Phone Number ()	
<u>Type of Account 3:</u> ☐ Checking ☐ Savings	□ New Account □ Change Amount □ Cancel Account
	Deposit Remaining Balance (Net Pay)
Name of Financial Institution	
Street Address	
City, State, Zip Code	
Phone Number ()	Bank Account No
Authorization Section	
authorize that institution(s) to credit this deposit(s) to writing on a direct deposit authorization form of can implement such cancellation or change (at least 10 da named below, I hereby authorize Federal-Mogul and th	itiate deposits into the account(s) of the financial institutions named above and I hereby o my account(s). This authorization is to remain in effect until I notify Federal-Mogul in ncellation/change, or upon termination of my employment, allowing reasonable time to ays). Only in the event those funds should be deposited erroneously into the account(s) he financial institution(s) to debit this account(s) for the amount of the erroneous credit.
Employee Signature:	Date:

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Attach Voided Check for Each Checking Account Attach Deposit Slip for Each Savings Account

## Instructions for completing the Direct Deposit Authorization

- 1. Complete this form for any direct deposit action (e.g. new account, change amount, or cancel account).
- 2. Print neatly all requested information in ink. If the Direct Deposit form is not legible it will be returned.
- Wages can be credited to any bank, credit union or other financial institution that is a member of the National Automated Clearing House Association (NACHA). Check with your financial institution to confirm that it is a member.
- 4. Select your direct deposit options.
- 5. To ensure accuracy of information please verify the routing number with your financial institution. Failure to do this could result in a delay or error of your wages being posted to your correct accounts.
- If your last name on the bank account(s) you are using for Direct Deposit is not the same last name that appears on your current paycheck, you must alert your bank, or you must initiate the appropriate change.
- 7. Attach a voided blank check for each checking account or deposit slip for each savings account for information verification.
- 8. Send completed form and attachments to your local payroll department.
- 9. It is always a good idea to call your bank when a recent change has occurred to verify that your payroll amount has been credited to your account.
- 10. Please be aware that if you have selected Option 2, and you don't have enough funds to cover the requested deposit amount, the available funds will flow to your net pay account. Your net pay account could be a checking or savings, depending on what you have selected. It is your responsibility to fund skipped account(s) by alternate means if this occurs.

Routing No.					
123456789	11484620040	2840			
МЕМО					
	,			DOLLAR	S
ORDER OF				\$	
PAY TO THE					
1000 Main St. Southfield, MI 48033			Date_		
Jane A. Doe					2840