

**AUTHORIZATION AGREEMENT FOR PERSONAL ASSISTANCE DIRECT DEPOSITS  
(TAPE INPUT)**

Bank Name: _____		
Bank Address: _____		
(City)	(State)	
Depositor Account No: _____		
Type of Account:	<input type="checkbox"/> Checking (Attach Voided Check)	<input type="checkbox"/> Savings (Attach proof of acct:)
		<input type="checkbox"/> Debit Card (Attach proof of acct:)
<b>TRANSIT ROUTING NUMBER</b>		<b>ACCOUNT NUMBER INFORMATION</b>
:           ...		

I hereby authorize Stavros CIL as Fiscal Intermediary for my employer (consumer) to deposit my net pay at the financial institution named above. I understand the Stavros CIL may cause my account to be adjusted to the extent necessary to correct any over-deposit and I agree to hold the above named financial institution harmless for any erroneous deposits or adjustments not caused by the financial institution.

PCA NAME: _____	
PCA SOCIAL SECURITY #: _____	
Date: _____	PCA Signature: _____
EMPLOYER (CONSUMER) NAME: _____	

It is understood this agreement may be terminated by me at any time by written notification to Stavros CIL. Any such notification to Stavros CIL shall be effective only with respect to entries initiated by Stavros CIL after receipt of such notification and a reasonable opportunity to act on it. Any such notification to the BANK by the PCA is unacceptable. The BANK may terminate this agreement by written notice to the PCA for just cause.

Attach a voided check for each checking account-**not a deposit slip**. If depositing to a savings account, ask your financial institution to give you the Routing/Transit Number for your account. It isn't always the same as the number on a savings deposit slip. This will help ensure that you are paid correctly.

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

John Q. Public  
Jane Q. Public  
111 Main Street  
Anywhere USA 02341

0101

Date: \_\_\_\_\_

Pay to the Order of \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ DOLLARS

MAIN STREET BANK  
3000 Main Street  
Anywhere USA 02341

Memo: \_\_\_\_\_

Checking Account #  
(Always between these 2 marks)

Routing /Transit #  
(a 9-digit number Always between The two marks)

Check #  
(not needed for sign-up)

**STAVROS WILL NOT PROCESS A DIRECT DEPOSIT REQUEST TO A CHECKING ACCOUNT WITHOUT A VOIDED CHECK ATTACHED TO THE AUTHORIZATION AGREEMENT.**

PLEASE CHECK TO SEE IF FUNDS HAVE BEEN DEPOSITED INTO YOUR ACCOUNT.  
STAVROS CIL WILL NOT BE LIABLE FOR ANY OVERDRAFT FEES INCURRED DUE TO DELAYS IN DIRECT DEPOSIT.