

# H.O.P.E. GROUP L.L.C.

Dedicated to Honoring and Optimizing the Potential in Everyone

## DIRECT DEPOSIT AUTHORIZATION

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Employee's Last Name

First Name

Middle Initial

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Home Phone Number

I hereby authorize H.O.P.E. Group L.L.C., through Bank of America, to directly deposit the net proceeds of any and all checks issued by the payroll system as indicated below. I further authorize Bank of America and the depository financial institution listed below to initiate any credit and/or debit entries to my account(s) including adjustments for any entries made in error.

I understand that this authority or any modifications will become effective only after verification of all information. This verification and processing will require a regular paycheck to be issued for up to two paydays before direct deposit will start or resume. H.O.P.E Group L.L.C. reserves the right at any payday to issue a regular paycheck and make no direct deposit for that payday, and resume direct deposit at the next possible payday.

This authority will continue in force until H.O.P.E Group L.L.C. receives written notice of change or termination.

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

Begin/Add Direct Deposit\*

Stop Direct Deposit

Change Account Number

Change Financial Institution

**Attach Voided Check or Preprinted Savings Deposit Slip\*Here**

**\*Please verify the ABA Routing number on the Direct Deposit Slip. If this number different than the Routing number on your check please write the correct information on your Direct Deposit Slip.**