

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDITS)

I hereby authorize Superior Staffing, Inc., hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credits in error to my  Checking  Savings Account (select one) indicated below and the depository names below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

TRANSIT/ABA NO. \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date \_\_\_\_\_ Signed \_\_\_\_\_

**\*\*\* Attach voided check, if direct deposit going in to checking account \*\*\***