

Direct Deposit Authorization Form

(Mark selections with an "X")

Name:	
City, State, ZIP:	
Start direct deposit	
Change financial institution to Bell	lco
Change account information within	n Belloo
Change amount sent to Bellco	
Bellco Routing/Transit Number: 3020750	18
Checking Savings (ch	eck one)
Account Number:	
Deposit all of my check	
Deposit part of my check (specify	amount per pay period): \$
Bellco employee verification that informat	tion is accurate:
Name:	Date:
IMPORTANT: If a Bellco representative	has not signed the above verification, please attach a voided check.
Sign Below	
adjustment entries to my account listed ab adjustments to my account without Bellco not entitled are deposited to my account,	inployer to make payment of my earning by initiating credit or bove. I also authorize and request Bellco to accept any such entried or being responsible for the correctness thereof. If funds to which I am I authorize my employer to direct Bellco to return said funds. Such successive payday unless I terminate this agreement. Cancellation of imployer's payroll department.
Signature:	Date: