



ResultsCX



### Authorization for Direct Deposit of Final Pay

This authorizes Results Alaska, Inc. to credit my final pay electronically or by any other commercially accepted method to my personal bank account the details of which are indicated below.

I hereby confirm that the information provided below is accurate and that the bank account indicated is active and able to accept the direct deposit to be made by the Company. I hold Results free and harmless from any liability that may result from any inaccurate or erroneous bank information that I may have supplied.

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Account Name:** \_\_\_\_\_

**Bank Account Number:** \_\_\_\_\_

**Bank:** \_\_\_\_\_

\_\_\_\_\_  
**Signature over printed name**

\_\_\_\_\_  
**Date**

