

Direct Deposit Form

Samantha Giles

CUSTOMER NAME		
		001
PAY TO THE ORDER OF	xxxxxxxxxxx	
XXXXXXX	xxxxxxxxxxx	XXXX DOLLARS
041215663 ROUTING NUMBER	5186752473522 ACCOUNT NUMBER	
Banking services provided by	y Sutton Bank, Member FDIC.	
AUTHORIZATION		
I, Samantha Giles	, authorize Exe	ecutive solutions LLC
applicable, to my Cash Appendicable, to my Cas		ay upon termination of my
	s written notification from me o	Ithorization and shall remain in effect fits termination. The information
I wish to deposit	<u>\$</u>	Entire paycheck
		5 / 21 / 25
SIGNATURE		DATE

Cash App | 1955 Broadway, Suite 600 | Oakland, CA 94612 Questions? Contact support@cash.app