DIRECT DEPOSIT AUTHORIZATION

		Worksite Employer Code:					
oloyee Name:		Social Security Number:					
		L1560-1560-1560-1560-1560-1560-1560-1560-					
				UNIL			
count Number: bur bank account number follows the transit number in the lower, left corner of the check (see diagram). Transit Number: A nine-digit number located in the lower, left corner of the check (see diagram).		. WY TO THE ORDEROR		s			
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		Tot					
		nordes teated \$256.562	ar	1547-1547-154	W.		
Account Type	(Transit/ABA Number)	(Account Number)	(Full Net Deposit)		Amount		
(Account Type)	(Transit/ABA Number)	Account Number	(Full Net Deposit)	Partial Deposit (Check if partial deposit)	Amount		
	(Transit/ABA Number)		Full Net Deposit		Amount		
			_	(Check if partial deposit)	Amount		
				(Check if partial deposit)	Amount		
				(Check if partial deposit)	Amount		
				(Check if partial deposit)	Amount		
				(Check if partial deposit)	Amount		

Authorization Statement:

By signing the Direct Deposit Authorization form below you are agreeing to the following:

- I authorize ADP TotalSource and the bank listed above to deposit my net pay or a portion thereof as indicated into my account each pay date.
- If funds to which I am not entitled are deposited to my account, I authorize ADP TotalSource to direct the bank to return said funds to ADP TotalSource.
- I understand that my deposit may not be credited to my account until midnight on the pay date indicated on the check voucher.
- I understand that it is my responsibility to ensure that my wages are being deposited correctly into my account each pay date.
- I understand that each new account will go through a pre-notification process that may take two payroll periods to complete.

Employee Signature:	Date:	
Limployee signature.	Date.	

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