

# Direct Deposit Authorization

I hereby authorize and give full permission to any/all affiliates and/or subsidiaries of Advance Accounting Services, Inc.; Advance Business Consultants, Inc.; Advance Staff Leasing, Inc.; Advance Employment of Mount Pleasant, Inc.; Advance Employment Enterprises, Inc.; and/or Advance Employment Services, Inc.; Advance Employment of Charlotte, Inc.; Jackson Employment Services, Inc.; Advance XI, Inc.; Advance Employment of Three Rivers, Inc.; hereinafter referred to as "Advance Employment" and/or "Employer," to begin depositing the amounts prescribed above from my paycheck in the accounts listed. I understand that the "Pre-Note" process required by the bank will take three to four weeks to complete. The first direct deposit transaction will take effect the week following the approval of the "Pre-Note."

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bank Routing #: \_\_\_\_\_ Checking Account #: \_\_\_\_\_

**OR**

Bank Routing #: \_\_\_\_\_ Savings Account #: \_\_\_\_\_

\_\_\_\_\_  
Associate Date

**Note: Please include a voided check for account number verification**

For office use only

Pre-note Date: \_\_\_\_\_ Approval: \_\_\_\_\_ Direct Deposit Date: \_\_\_\_\_

