Direct Deposit Authorization Form

I, _____, authorize <u>Willoughby Inc/SL8 Home Services</u> to directly deposit my wages, or earnings, as applicable, to my _____account, including my final pay upon termination of my contract.

This authorization replaces any previous direct deposit authorization and shall remain in effect until my employer receives written notification of termination or until the company has notified me that this service has been discontinued. The information for my _____ account is provided below.

Name of Bank_____

Name on Account (full name):_____

Account #:_____

Routing #:_____

Type of Account:_____

_____   _____
Signature   Date