



Direct Deposit Authorization

I authorize Hire IT People, Inc to initiate credit and, if necessary, debit entries and adjustments for any credit entries in error to our Financial Institution named below, and to credit or debit the same from such account. I acknowledge that the authority will remain in effect until I have cancelled it in writing and that the origination of Direct Deposit Payroll transactions.

Bank 1 (Include Percentage or Dollar Amount of Net Paycheck) Attach a Copy of a Void Check when you send this Authorization.

Bank or Financial Institution:

City, State, Zip:

Routing Number:

Account Number:

Amount or Percentage (Optional):

Bank 2 (Include Percentage or Dollar Amount of Net Paycheck) Attach a Copy of a Void Check when you send this Authorization.

Bank or Financial Institution:

City, State, Zip:

Routing Number:

Account Number:

Amount or Percentage (Optional):

This authorization is to remain in full force and effect until Company has received written notification from me of its termination in such time.

Full Name:

Signature

Date