

Direct Deposit Authorization

Employee name: _____

Bank Name: _____ Routing: _____

Account Number: _____ % or Amt: _____

Bank Name: _____ Routing: _____

Account Number: _____ % or Amt: _____

I, _____, authorize Riverside Personnel Service, Inc. to deposit my pay to the account(s) listed above. I understand this authorization will continue until my assignment ends or until I have provided a written request to discontinue this current arrangement*.

Signature Date

*Please allow 7 business days to process your request.

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