

PLEASE INITIAL HERE: \_\_\_\_\_



## EMPLOYEE AUTHORIZATION FOR DIRECT DEPOSIT

Employee Name *(please print)*

Soc Sec #

I hereby authorize my employer, IQ Pipeline, LLC, (hereinafter called COMPANY) to initiate credit entries, debit entries, and adjustments (for any credit entries in error) to my checking/savings account indicated below.

Company will provide me with a notification of depositor earnings statement which will include amount deposited to my checking/savings account and date of the transfer deposit. This authority is to remain in full force and effect until Company has received written notification from me of its termination in such time and in such manner as to afford Company a reasonable opportunity to act on it, or until Company has sent me ten (10) days written notice of Company's termination of this arrangement.

### I wish to deposit into (check one):

Checking

Savings

Bank Name

City

State

**ROUTING & TRANSIT NUMBER**

**CHECKING ACCOUNT NUMBER**

**Please attach a voided check and/or banking information on banks letterhead**

(Routing and Account numbers provided above must match those on the attached original form)

**EMAIL ADDRESS YOU WOULD LIKE YOUR PAYSTUB SENT TO**

Signature \_\_\_\_\_

Date