



DIRECT DEPOSIT FORM

1. Take this complete application form to your employer's payroll department
2. Include a voided check so your employer can confirm your account and routing numbers

DIRECT DEPOSIT APPLICATION

Customer Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Please have my payroll check automatically deposited into the following accounts:

Account number: _____ Checking ____ Savings ____

Bank name and routing number: **INTERNATIONAL BANK OF CHICAGO**
ABA # 0710-0665-1

I authorize (name of Business) _____ and International Bank of Chicago to automatically deposit my payroll check into my account listed above. (This includes authorization to correct any entries made in error.) This authorization will remain in effect until I give written notice to cancel it.

Customer signature: _____ Date: _____

ATTACH VOIDED CHECK