

**SECTION 1**

EMPLOYEE NAME (LAST, FIRST, MIDDLE INITIAL):	REGISTRATION NUMBER:	SOCIAL SECURITY NUMBER:
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**SECTION 2**

You may enroll in up to three accounts. Deductions will be made in priority 1, 2, 3 respectively. Any remaining amount will be issued in a check if remaining net amount is not designated.

NEW       CHANGE AMOUNT       CANCEL

Bank Name: \_\_\_\_\_ Bank Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Routing/Transit Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Checking       Savings      Amount of Deposit: \$ \_\_\_\_\_ or  Entire Net Amount

NEW       CHANGE AMOUNT       CANCEL

Bank Name: \_\_\_\_\_ Bank Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Routing/Transit Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Checking       Savings      Amount of Deposit: \$ \_\_\_\_\_ or  Remaining Net Amount

NEW       CHANGE AMOUNT       CANCEL

Bank Name: \_\_\_\_\_ Bank Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Routing/Transit Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Checking       Savings      Amount of Deposit: \$ \_\_\_\_\_ or  Remaining Net Amount

**SECTION 3**

**PLEASE ATTACH A VOIDED PERSONAL CHECK FOR VERIFICATION**

Here is a sample check detailing where the information necessary to complete this form can be found:

JOHN DOE JANE DOE 11 South Main St. Anywhere USA 12345	DATE _____	1234
PAY TO THE ORDER OF _____		\$ [ ]
		DOLLARS
BANK OF USA 123 MAIN STREET ANYWHERE, USA 12345		Account Number
MEMO _____		
Routing Number → ⑆ 123456789⑆	⑆ 123456789⑆	⑆ 1234

**SECTION 4**

I hereby authorize SSA Cooper, LLC to initiate credit entries directly to the accounts identified above. In the event that any funds are erroneously deposited to any specified account, SSA Cooper has the right to recover all erroneously deposited funds.

The authorization is to remain in full force and effect until SSA Cooper has received written notice from me of its termination in such time and in such manner as to afford SSA Cooper and Financial Institution a reasonable opportunity to act on it.

Signature \_\_\_\_\_ Date \_\_\_\_\_