

RIPE FOR HARVEST EMPLOYEE DIRECT DEPOSIT AUTHORIZATION

In order to provide you with direct deposit of your paychecks, we must have a completed and signed original of this form.

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| <input type="checkbox"/> New Employee |
| <input type="checkbox"/> Change Bank Account Effective Date _____ Please allow up to 10 banking days for processing. |

Employer: **RIPE FOR HARVEST**

Employee _____

Checking Account Savings Account*

Attach **Voided Check** Here

DEPOSIT SLIPS ARE NOT ADEQUATE

* **If the bank account you wish to have your paychecks deposited into is a SAVING ACCOUNT, we must have the Routing Number and Account Number on your Financial Institution's letter-head. Your bank should furnish this to you if you make your request in person.**

If you don't have a physical check, please type in your Routing Number and Account Number.

Routing Number: _____

Account Number: _____

I hereby authorize Ripe For Harvest, Cedarstone and its agents, including financial institutions, to initiate electronic credit entries and, if necessary, debit entries and adjustments for any credit entries resulting from a payroll payment error to my checking or savings account listed above and to collect appropriate fees and charges. I understand that this authorization shall remain in effect until I have canceled it in writing.

Signature

Date

Please scan and email to: rfhgregg@gmail.com