

Stewart's Shops

Request for Direct Deposit

Simply complete this form, attach a voided check or deposit ticket, and return to Manager/Supervisor to be sent to the Payroll Department.

Employee Information:

Date: _____ Social Security#: _____

Shop/Dept. Name and Number _____

Employee Name: _____

Account Information:

My account is with Stewart's Federal Credit Union. I would like my payroll deposited as follows:

Account No. _____ Total or Partial Amount \$ _____

Checking: \$ _____ Savings: \$ _____ Loan: \$ _____ Other: \$ _____

Christmas Club: \$ _____ Vacation Club: \$ _____ Energy Club: \$ _____

Bank Name: _____ Account No. _____

Bank Routing No.: _____

_____ Checking _____ Savings Total or Partial Amount \$ _____

Bank Name: _____ Account No. _____

Bank Routing No.: _____

_____ Checking _____ Savings Total or Partial Amount \$ _____

Direct Deposit Authorization Agreement

I authorize and request Stewart's Shops Corp., to automatically deposit any amount due to me to my Account(s) listed above.

I understand that this agreement may be terminated by me or Stewart's Shops Corp., at any time by written notification. Any such notification requires a reasonable time to act upon it.

I authorize Stewart's Shops Corp., to withdraw funds from my account for the purpose of correcting a deposit made in error to my account.

Signature: _____ Date: _____