

AUTHORIZATION FOR DIRECT DEPOSIT

I authorize Mountain Kids Louisville LLC to deposit my pay automatically to the account indicated below and if necessary, to adjust or reverse a deposit for any payroll entry made to my account in error. This authorization will remain in effect until I cancel it in writing and in such time as to afford a reasonable opportunity to act on it.

Direct Deposit

Birthdate: _____

Name on bank account: _____

Bank routing number: _____

Bank account number: _____

Deposit to Checking Account: _____ or Savings Account: _____

Important: Please attach a voided check for each bank account to which funds should be deposited.

Employee/Contractor signature: _____

Date: _____