

Payroll Direct Deposit Enrollment Form

I request _____, my employer, direct deposit my pay. I hereby authorize my employer to initiate credit entries for my net pay to my Money Network Card, issued by MetaBank. If funds to which I am not entitled are deposited to my Card, I authorize a corresponding debit to my Card and return of such funds. This authority is to remain in effect until my employer or MetaBank has received written notification from me of its termination in such time and such manner as to afford my employer and MetaBank a reasonable opportunity to act on it or until MetaBank cancels my Card. I acknowledge that the origination of entries to my Card must comply with the provisions of U.S. law.

Routing/Transit Number: 084003997

Account Number: 5307060124814628

Account Type: Select "Prepaid Card". Otherwise, select "Checking"

Employee ID: _____

Print Name: _____

Signature: _____

Date: _____

Note to Employers: Setting up this direct deposit does not require pre-noting. If you have any questions about this form, call 1-866-387-5146.