



Authorization of Direct Deposit

The undersigned (hereafter referred to as the "employee") hereby authorizes and requests PAYCOM to make deposits from time to time in the account(s) identified below and authorizes the bank to accept such deposits. It is agreed that these deposits may be made electronically and under the Rules of the National Automated Clearing House Association. It is agreed that PAYCOM is only responsible for direct deposit of funds that have previously been received from Logan kastner hereafter referred to as the "employer".

Attach a voided check, copy of a check, or spec sheet for each account. Indicate whether it is a checking or saving account. (No deposit slips)

1. Call your bank and confirm the ACH Routing Number(s) and Account numbers for Checking and/or Savings
2. Complete and Sign the form

Main Account (Net Pay) - Checking or Savings Account (circle one)

Acct # 1571279984

ACH Routing # 1 / 0 / 7 / 0 / 0 / 5 / 0 / 4 / 7 /

Bank Name First bank

Additional Account - Checking or Savings Account (circle one)

Acct # _____ Dollar Amount _____

ACH Routing # / / / / / / / / / /

Bank Name _____

Additional Account - Checking or Savings Account (circle one)

Acct # _____ Dollar Amount _____

ACH Routing # / / / / / / / / / /

Bank Name _____

Additional Account - Checking or Savings Account (circle one)

Acct # _____ Dollar Amount _____

ACH Routing # / / / / / / / / / /

Bank Name _____

Additional Account - Checking or Savings Account (circle one)

Acct # _____ Dollar Amount _____

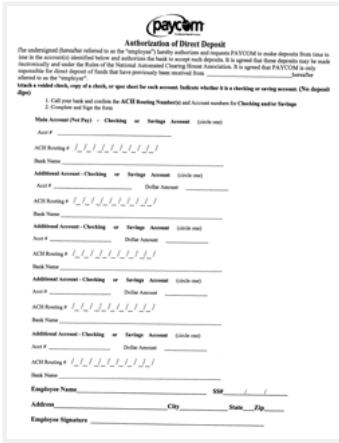
ACH Routing # / / / / / / / / / /

Bank Name _____

Employee Name Logan kastner SS# 522 / 87 / 2317

Address 8899 pearl St 1611 City Thornton State Co Zip 80229

Employee Signature 








CMG Paycom Form

Adobe Sign Document History

10/10/2016

Created:	10/10/2016
By:	Caitlin Scholl (Caitlin@corpmgmtgroup.com)
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-  Document created by Caitlin Scholl (Caitlin@corpmgmtgroup.com)
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