

Direct Deposit Form



Employee Name

- **Bank Name:** Sutton Bank
- **Bank Address:** 1 S Main St, Attica, OH 44807
- **Routing Number:** 041 215 663
- **Account Number:**

AUTHORIZATION

I, _____, authorize _____
to directly deposit my wages (less lawful withholdings and deductions) or
earnings, as applicable, to my Cash App account, including my final pay upon
termination of my employment or engagement.

This authorization replaces any previous direct deposit authorization and shall
remain in effect until my employer receives written notification from me of its
termination. The information for my account is provided above.

I wish to deposit % _____ \$ _____ Entire Paycheck

Signature

Date