



Automatic Direct Deposit Authorization (ACH Credits)

a Branch of CIB Marine Bank

I am requesting direct deposit of my paycheck (or any benefits) into my account(s) listed below.

Company Information:

Company Name _____

Address _____

City _____ State _____ Zip Code _____ Phone _____

Customer Information:

Name _____

Tax ID# _____ Employee ID# _____

Address _____

City _____ State _____ Zip Code _____ Phone _____

Account Information:

Type Account Number
Checking _____
Savings _____
Money Market _____

Depository Bank Information:

Marine Bank
a Branch of CIB Marine Bank
2323 N. Mayfair Road
Wauwatosa, WI 53226
Phone: 414.607.6000
Routing/Transit Number: 071122933

Amount to pay Company:

[] Full amount _____ % Other \$ _____

Additional Comments: _____

Customer Authorization:

I/We authorize COMPANY (named above) to initiate credit entries and, if necessary to initiate debit entries to correct an erroneous credit entry to my/our account at the Depository Bank named above, for the purpose of automatically depositing funds to my/our account. I/We acknowledge that the origination of these transactions must comply with the provisions of U.S. law. I/We understand that this authorization replaces any previous authorization and will remain in full force and effect until the COMPANY has received written notification from me/us of its termination in such time and in such manner as to afford the COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Customer Signature: _____ Date: _____

ATTACH A VOIDED CHECK FOR VERIFICATION OF YOUR ACCOUNT INFORMATION