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Cash App Direct Deposit Authorization

Employee Name

Employer Name

Address

Bank Name

Routing Number

Account Number

Account Type

☐ Savings ☐ Checking

Amount (\$ or %)

I authorized _____ to deposit my pay directly to the account below.
This authorization will remain in effect until written authorization is given for this
to be terminated.

Employee Signature

Date Signed

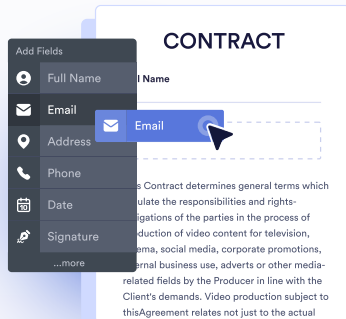


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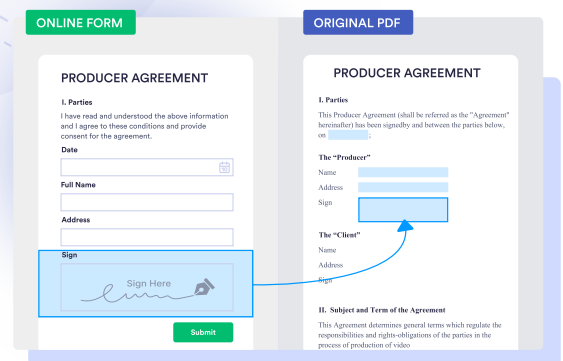
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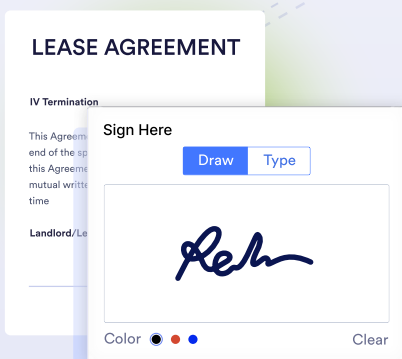
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