

Direct Deposit Authorization

I, _____, authorize PossAbilities of Southern Minnesota, Inc. to deposit my paycheck directly into my bank account. I have attached one of the following as my bank account information:

VOIDED check from a checking account

or

Deposit slip from a savings account

Support Worker Signature

____/____/____
Date

Support Worker Social Security Number _____

NOTE: The first time you get a paycheck it will be an ACTUAL check. The SECOND paycheck will be directly deposited into the bank account you have designated.