

Instructions:

Employee: Fill out and return to your employer.

Employer: Save for your files only.	
This document must be signed by employees requesting au retained on file by the employer. Employees must attach a v to help verify their account numbers and bank routing numb	oided check for each of their accounts
Account 1 type: (Please circle one) Checking OR Savings	
Bank routing number (ABA number): 324377286	
Account number:	
Percentage or dollar amount to be deposited to this account	t:
Account 2 (remainder to be deposited to this account)	
Account 2 type: (Please circle one) Checking OR Savings	
Bank routing number (ABA number):	
Account number:	
Attach a voided check for each account here:	
Authorization (enter your company name in the blank space "Company") to send credit entries (and appropriate debit an by any other commercially accepted method, to my (our) ac accounts I (we) identify in the future (the "Account"). This authe Account to post all such entries. I agree that the ACH tracomply with all applicable U.S. Law. This authorization will be a written termination notice from myself and has a reasonable	d adjustment entries), electronically or count(s) indicated below and to other uthorizes the financial institution holding ansactions authorized herein shall be in effect until the Company receives
Authorized signature: Emp	oloyee ID #:
Print name:	
Date:	

Main Branch

P: 435.259.6124 F: 435.259.6123 725 North Main P.O. Box 1047 Moab, UT 84532

Green River Branch

P: 435.564.2100 F: 3435.564.2107 45 West Main Street Green River, UT 84525

Blanding Loan Office

P: 435.678.3444 1 South Main Street Blanding, UT 84511

Monticello Branch

P: 435.587.4015 16 East 200 South, Suite D P.O. Box 658 Monticello, UT 84535