



Employee Direct Deposit Enrollment Form

This authorizes, Milliner & Associates, LLC (the “Company”), to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account(s) indicated below and to other accounts I (we) identify in the future (the “Account”). This authorizes the financial institution holding the Account to post all such entries.

Account #1

Account #2

Type (check one): Checking Savings

Type (check one): Checking Savings

Bank Name

Bank Name

Bank Routing/Transit #

Bank Routing/Transit #

Account #

Account #

Dollar Amount to be Deposited or Entire Net Amount

Dollar Amount to be Deposited or Entire Net Amount

This authorization will be in effect until the Company receives a written termination notice from myself and has a reasonable opportunity to act on it.

Signature

Printed Name

Date

IMPORTANT: This document must be signed by employees requesting automatic deposit of paychecks and retained on file by the employer. Do not send this form to Intuit. Employees must attach a voided check for each of their accounts to help verify their account numbers and bank routing numbers.