



# SEIU Local 503 Member Direct Deposit Expense Enrollment

(Complete and sign this form and give to Accounting. Please be aware it may take up to two weeks for direct deposit to be set up with your bank.)

I hereby authorize SEIU Local 503, OPEU to deposit my reimbursed expenses into my bank account at the financial institution named below. I also authorize SEIU Local 503, OPEU to make withdrawals from this account in the event that a credit entry is made in error.

This agreement will remain in effect until SEIU Local 503, OPEU receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form.

### Member Information

Member Name (Please Print)

Email Address

Member Signature

Date

### Account Information

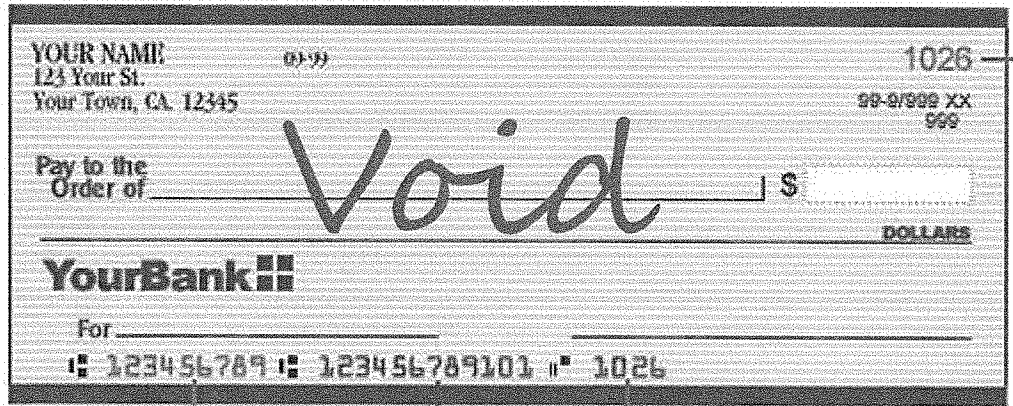
Name of Financial Institution

ABA/Routing Number

Account Number

### PLEASE ATTACH A VOIDED CHECK

(a voided check must be provided-not a deposit slip-this is a bank requirement)



ABA or Bank Routing Number

Bank Account Number

Check Number