

Goldfish Locum Tenens
AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDITS)



- Accept Direct Deposit (Complete Sections I and II)**
- Decline Direct Deposit (Complete Section II)**

Section I – Bank Information

I hereby authorize Goldfish Locum Tenens and its entities, hereinafter called COMPANY, to initiate credit entries and to initiate if necessary, adjustments for any credit entries in error to my checking and / or savings account indicated below at the depository named below.

Account Number: _____

Routing Number: _____

Checking or Savings?: _____

Name of Deposit Institution: _____

City, State: _____

Please attach a copy of a voided check.

This authority is to remain in full force and effect until COMPANY, has received written notification from me of its termination in such time and in such a manner as to afford COMPANY and Deposit Institution a reasonable opportunity to act on it.

Section II – Candidate Information

Candidate Name: _____

Address where check is to be mailed _____

Street Address

City, State Zip

Phone Number: _____

Social Security Number: _____

**If declining Direct Deposit: Checks are mailed out on a weekly basis on Friday. Please allow 7-10 business days to receive check via standard shipping times with the United States Postal Service.*

Signature _____

Date: _____