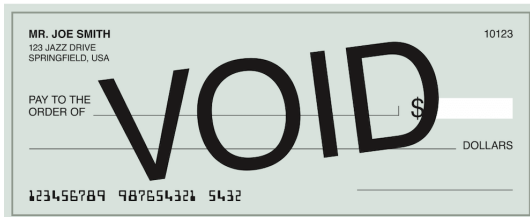


Direct Deposit Employee Authorization Agreement for Automated Clearing House Entries

I hereby authorize Pinnacle Employee Services, hereinafter called COMPANY, to initiate ACH entries (credit or debit) and to initiate, if necessary, adjustments for any entries in error to my checking and/or savings account(s) indicated below and the depository bank(s) named below, hereinafter called DEPOSITORY, to credit and/or debit the same to my account(s).

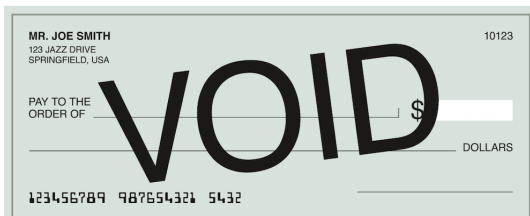
Please attach one of the following for each account listed below: a voided check, a copy of a canceled check, or a statement from the bank with routing and account numbers clearly printed. **Account WILL NOT be entered WITHOUT support.**



Bank Name: _____

Account Type: Checking Savings

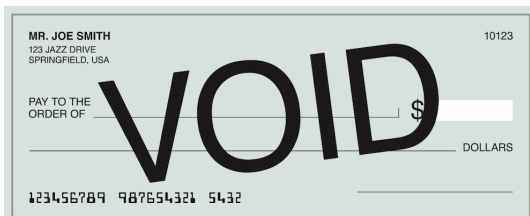
Amount: \$ _____ or _____ %



Bank Name: _____

Account Type: Checking Savings

Amount: \$ _____ or _____ %



Bank Name: _____

Account Type: Checking Savings

Amount: \$ _____ or _____ %

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 manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act upon termination.

Name (Print): _____ **Social Security Number:** _____

Signature: _____ **Date:** _____