

Authorization Agreement for Automatic (ACH) Credits

Company Name: **Connecticut Yankee Council, BSA** Div. # **NP72**

Employee Name: _____

Address, Street: _____

City, State, Zip: _____

I hereby authorize ADP, Inc. to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to my account indicated below and the Depository Institution to credit and/or debit the same to such account.

Depository Name: _____

Address, Street: _____

City, State, Zip: _____

You must attach a copy of a voided check or a letter from the Depository Institution indicating the type of account (Savings or Checking), the Transit/ABA routing number, and the depository account number.

This authority is to remain in full force and effect until notified by me or Employer of termination or revocation.

By: _____ Date: _____
(Employee Signature)