

Direct Deposit Agreement Form

Authorization Agreement

I hereby authorize MyGuru to initiate automatic deposits to my account at the financial institution named below. I also authorize MyGuru to adjust future payments if an automatic deposit is found to be over-paid in error.

Further, I agree not to hold MyGuru responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until MyGuru receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Payroll Department.

Account Information	
Name of Financial Institution:	
Routing Number:	
Account Number:	☐ Checking ☐ Savings
Signatu	re
Authorized Signature (Primary):	Date:
7.dt.1011264 5181146416 (171111417).	
Authorized Signature (Joint):	Date:

NOTE: Please be advised that MyGuru can only make direct deposits into personal checking or savings accounts and is not able to make direct deposits into business checking or savings accounts.