



Nationwide BankSM
On Your Side[®]

DIRECT DEPOSIT AUTHORIZATION FORM

Please complete and return this form to your Payroll Department, along with a voided Nationwide Bank check.

Employee Name: _____

Social Security Number: _____

Please have my payroll check automatically deposited into the following checking account:

Bank Name: **Nationwide Bank** _____

Bank Routing Number: **044072324** _____

My Checking Account Number: _____

Employer Name: _____

Employer Address: _____

Employer Payroll Contact: _____

Name

Phone Number

I hereby authorize my employer to deposit my payroll check into the checking account listed above at Nationwide Bank.

Employee's Signature: _____ Date: _____

Nationwide Bank, Member FDIC