



Snoqualmie Indian Tribe

Authorization for Direct Deposit- Vendor/ Contractor

This authorizes the Snoqualmie Indian Tribe to send credit entries (and appropriate debit entries), electronically or by any other commercially accepted method, to my (our) account(s) indicated below and to other accounts that I (we) identify in the future (the "account"). This authorizes the financial institution holding the Account to post all such entries.

Account Information

Account Type (check one): Checking Savings

Bank Name:

Routing #:

Account #:

Percentage or Dollar Amount to be Deposited to This Account:

Please attach a voided check for each account here.

This authorization will be in effect until the Snoqualmie Indian Tribe receives a written termination notice from myself and has a reasonable opportunity to act on it.

Printed Name:

Vendor/ Contractor Signature _____

Date _____

Please provide email in order to receive notification of direct deposit:

Email:

IMPORTANT: This document must be signed by the vendor/ contractor requesting automatic deposit of paychecks and retained on file by the tribe. Vendors/ Contractors must attach a voided check for their accounts to help verify their account numbers and bank routing numbers.