



## Debit Bank Authorization

We, \_\_\_\_\_, hereby request and authorize BenePAY, LLC  
(Company Name)  
(hereinafter "BenePAY"), to debit \_\_\_\_\_ checking account for all payroll  
(Checking Account Name)  
service charges incurred as a result of payroll services provided by BenePAY.

Payroll services:

- All
- Paychecks
- Direct Deposit
- Taxes
- Agency
- Billing
- Workers Comp

The bank information is as follows:

Bank Name: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Effective Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Client Number: \_\_\_\_\_

Client Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_