Direct Deposit Authorization Form

Choose amount to deposit each pay period:

☐ **My entire check**
(100% of every check)

☐ **A set percent of** 0 **%**
(Example: 50% of every check)

☐ **A set amount of $**
(Example: $150 from every check)

Ensure your contact information and Deposit ID number are correct.

First and Last Name
Full Address
City, State Zip Code

Deposit Amount: See Amount Above

073972181
Routing Number

Deposit ID Number

Checking
Account Type

MetaBank, Member FDIC
c/o RushCard
PO Box 42482
Cincinnati, OH 45242

Print the form, sign it and give it to your employer or government benefits agency.

Direct Deposit Authorization

I authorize my employer or payer to electronically deposit the specified payroll amount into my RushCard prepaid account each pay period and to initiate, if necessary, reversal entries and adjustments for any credit entries in error to my card (not to exceed the original credit).

SIGN HERE

Signature

Date