

NET PAY DATA PROCESSING, INC.
DIRECT DEPOSIT OF PAYROLL

**Employee Authorization Agreement
For Automatic Deposits**

COMPANY: **COSTAMAR TRAVEL, CRUISES & TOURS, INC.**

COMPANY ID NUMBER: _____

The undersigned hereby authorizes Net Pay Data Processing, Inc. and/or its authorized agents, to initiate credit/debit entries for payment of Payroll, and if necessary, adjusting credit/debits for entries made in error or entries requiring reversals due to returned items to the account indicated below and the Depository named below is hereby authorized to credit and/or debit the same to or from said account.

BANK/DEPOSITORY: _____

BRANCH: _____ **TELEPHONE:** (____) _____

CITY: _____ **STATE:** _____ **ZIP:** _____

TRANSIT/ROUTING/ABA NUMBER: _____

ACCOUNT NUMBER: _____

CHECK ONE: **CHECKING** _____ **SAVINGS** _____

IF CHECKING PLEASE INCLUDE A VOIDED OR CANCELLED CHECK.
IF SAVINGS PLEASE PROVIDE ACCOUNT VERIFICATION LETTER.

This authorization is to remain in full force and effect until the undersigned has provided written authorization to Net Pay Data Processing, Inc. for its termination at such time and in such manner as to afford its agents and Depository a reasonable opportunity to act on it. The undersigned represents and warrants that it is authorized and empowered to execute this authorization for the purposes specified herein and indemnities and holds Net Pay Data Processing, Inc. and its agents harmless from any damage, loss or claim resulting from Company's authorized actions hereunder.

NAME: _____ **EMP. ID:** _____

SIGNATURE: _____ **DATE:** _____

CHECK ONE: **NEW PARTICIPANT:** _____ **CHANGE:** _____