

Direct Deposit Enrollment Form

Name _____

Bank Name One Finance, Inc.

Account Type Checking

Account Number _____

Routing Number 125109006

Amount

Deposit my
entire paycheck.

Deposit \$ _____
of my paycheck.

Deposit _____%
of my paycheck.

Voided Check

ONE FINANCE, INC.
5415 Evergreen Way
Everett, WA 98203

DATE _____ 123

PAY TO THE ORDER OF _____ \$ _____

_____ DOLLARS

125109006 _____ **123** _____
Routing Number Account Number

The image of this voided check may be provided to your employer or other payer for no other purpose except to set up direct deposit to your One account.

Authorization

I authorize _____ (employer/payer) to initiate credit entries, and if necessary to initiate any debit entries to correct previous credit errors, to my One account. This authority will remain in effect until I notify my employer or payer in a manner specified by my employer or payer.

Signature

Date