



Direct Deposit Agreement Form

Authorization Agreement

I hereby authorize Iowa Family Services to initiate automatic deposits to my account at the financial institution named below. I also authorize Iowa Family Services to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold Iowa Family Services responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until Iowa Family Services receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the IFS Main Office.

Electronic Pay Stubs and W-2 Consent

Iowa Family Services, Inc offers ALL employees online access to view, save and print pay stubs and W2 statements.

- Pay Stubs - I understand that as an employee of iFS I can access copies of my pay stubs electronically by creating an employee login with the instructions provided. Paystubs are available to all employees.
- W2 - I elect to receive my W2 electronically - QUICKEST, SAFEST, MOST CONVIENENT method. I understand that my year end W2 will be uploaded electronically and can be accessed through the iFS intuit website.
 - Opt Out – I elect not to receive my W2 electronically and understand a hard copy will be mailed by January 31st of each year. My W2 will be mailed to my address on file. I am responsible and agree to notify iFS with any address changes. I understand that I may be charged a printing fee. If my W2 is mailed to the wrong address and a duplicate copy is printed.

Account Information

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____ Checking Savings

Signature

Authorized Signature (Primary): _____ Date: _____

Printed Name: _____

Please attach a voided check or deposit slip and return this form to the IFS Main Office.