

## PAYROLL DEPOSIT AUTHORIZATION FORM

### Take the first step toward your financial future when you take your card with you!

Whether you work for the same company until you retire or change jobs regularly, you can ALWAYS have your pay loaded onto your **MiCash Prepaid MasterCard**® as well as earnings from other sources such as second jobs or government benefits. Simply provide the requested personal information and your 16-digit account number where indicated, sign your name and **return this form to your employer's payroll department.**

#### EMPLOYEE INFORMATION:

Name: .....

Address: .....

City: ..... State: ..... Zip Code: .....

Phone Number: .....

Type of Government issued ID: ..... ID Number: .....

Birth Date: ..... Mother's Maiden Name: .....

Bank Name / City / State: .....

Routing / ABA number: **\$+ - +&% %**

16 digit Account Number from the front of your card:

#### EMPLOYER INFORMATION:

I hereby authorize: .....

Address: .....

City: .....

State: ..... Zip: ..... Phone: .....

To deposit / debit funds directly to my MiCash Prepaid MasterCard.

By signing below, you state that the information given on this form is true to the best of your knowledge.

.....  
Employee Signature Date

This card is issued by MetaBank pursuant to license by MasterCard International Incorporated.  
Use of this card is governed by the terms in your cardholder agreement.