Mille LacsBand of Ojibwe

Per Capita Account 2010

Direct Deposit Form

Authorization Agreement

I hereby authorize Mille Lacs Band of Ojibwe to initiate automatic deposits to my account at the financial institution named below. I also authorize Mille Lacs Band of Ojibwe to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold Mille Lacs Band of Ojibwe 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 Mille Lacs Band of Ojibwe receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Payroll Department.

Account Information

Name of Financial Institution:

Routing Number: ☐☐☐☐☐☐☐☐☐

☐ I wish to depsoit the entire amount

I wish to depsoit: $_____

Account Number: _____

☐ Checking ☐ Savings

Optional Second Account Information

Name of Financial Institution:

Routing Number: ☐☐☐☐☐☐☐☐☐

☐ I wish to depsoit the entire amount

I wish to depsoit: $_____

Account Number: _____

☐ Checking ☐ Savings

Signature

Print your name _____ **Soc. Sec. #** _____

Authorized Signature _____ **Date:** _____

Please attach a voided check and return this form to the Percapita Specialist

Mille Lacs Band of Ojibwe
Attn: Per Capita Specialist
43408 Oodena drive
Onamia, MN. 56359