



Direct Deposit Form

Employer Name: _____

Employee/Contractor Information:

Employee/Contractor Name: _____

Address: _____

E-mail: _____

Employee/Contractor Bank Information:

Bank Name: _____

Name and Phone# on account: _____

Account No.: _____

Routing No.: _____

Type of Account: (please check one) _____ Checking _____ Savings

If partial, balance of pay to: _____ Manual (paper check) or

Name and Phone# on account: _____

Account No.: _____

Routing No.: _____

Type of Account: (please check one) _____ Checking _____ Savings

Employee/Contractor Signature: _____ **Date:** _____

Scan/email a copy to contact@argosfinancialsplus.com,
or mail to 129 Whiskey Ranch Rd, Runaway Bay, TX 76426