DIRECT DEPOSIT AUTHORIZATION FORM

Fill in the boxes below and sign the form. Forward the completed form and voided check or bank letter to: Opportunities, Inc. Payroll Department. Last Name First Name Social Security Number Name of Financial Institution Type of Account Account Number (Include hyphens but omit spaces and special symbols) Routing Transit Number Ownership of Account (All 9 boxes must be filled. The first two numbers must be 01 through 12 or 21 through 32) By signing this agreement, I authorize Diversified Personnel Services, a division of Opportunities, Inc. to initiate electronic credit entries to the account indicated above for the purpose of paycheck direct deposit and if necessary, debit entries and adjustments for any credit entries made in error. This authority will remain in effect until I have cancelled it in writing. In the event that the account information provided is invalid, I authorize DPS to deposit my funds on to a Global Cash Card. Signature Date If the account is a joint account or in someone else's name, that individual must also agree to the terms stated above by signing below. Signature Date HOW TO COMPLETE THIS FORM Fill in all boxes above. Return to the Opportunities, Inc. payroll 1. 2. Sign and date the form department. If the account is not in your name alone, have the other account holder sign also. JOHN PUBLIC 1234 123 Main Street 20** Call your financial institution to Your Town, FL 12345 make sure they will accept direct deposits. PAY TO THE ORDER OF Verify your account number and routing transit number with your Your Town Bank **DOLLARS** financial institution. Your Town, FL 12345 Do not use a deposit slip to verify the routing number.

(102000199) (23456789)

NOTE: THE ACCOUNT AND ROUTING NUMBER MAY APPEAR IN DIFFERENT PLACES ON YOUR CHECK

Routing Transit Number

Account Number