

## **DIRECT DEPOSIT ENROLLMENT FORM**

	form by filling in all rm will contain confid			ould be ke	pt secure.			
First Name	MUKESH		Last No	ame <u>k</u>	CANDA			
Address _	1638 E MAIN ST A	PT 207						
City _	KENT		State C	)H		Zip _	44240-2894	<u> </u>
l authorize –			ayroll Department to establish direct deposit of my paychector to the account(s) listed below.					
	(Em		titto tile dei	בכטמוונן א) וואנפט שפוטש.				
	yer requires a voided			_				
John Anderson 123 MAIN STREET COLUMBUS, OHIO 43287			Date			101	s) Here	
Pay to the Order of					\$		Dellava	Attach Voided Check(s) Here
	1000153	012345678		0 1			Dollars	Attach Voi
Ro	outing Number	Accounting Numb	oer					
Primary Account	t 0259357423	32	Routing	Number	041215032	2		
Deposit Amount \$				or				%
Secondary Accordif applicable)			Routing	Number				
Deposit Amount	:\$			or				%

3. Drop off this completed form at your employer's HR department. That's it, you're done.

This form is for your convenience, and we hope you find it helpful!

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