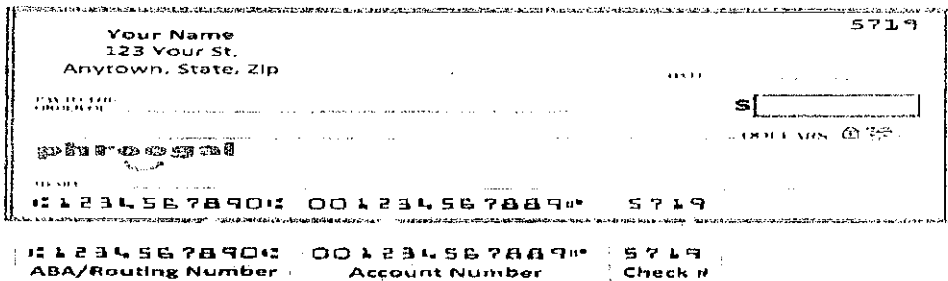


Direct Deposit Authorization Form

Name: _____		
Transaction Type: <input type="checkbox"/> New Activation <input type="checkbox"/> Cancellation <input type="checkbox"/> Change		
Bank/Financial Institution Name: _____		
Note: Funds can be deposited into one account or split between accounts as a set percent or dollar amount.		
Primary Account Information:	Routing #: (9 digits) _____ Account #: _____ Amount: 100% or specified \$/?: _____ Type of Account: Checking Savings	
Secondary Account Information: <i>(if no secondary account is listed 100% will go to primary)</i>	Routing #: (9 digits) _____ Account #: _____ Amount: 100% or specified \$/?: _____ Type of Account: Checking Savings	
EXAMPLE  <div style="display: flex; justify-content: space-between; margin-top: 5px;"> ⑆ 1234567890⑆ 00123456789⑆ 5719 ⑆ 1234567890⑆ 00123456789⑆ 5719 </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> ABA/Routing Number Account Number Check # </div>		Please attach a voided check or letter from your financial institution with you deposit information

By signing below, I authorize Oaklawn Jockey Club to deposit my paycheck into the above listed account(s) and will remain in force until I have given written notice to cancel or amend, or until which time I am no longer employed and it will be deactivated. I understand that the time of funds availability varies by institution and that any funds availability, fees usage limits or restrictions are set by the institution and Oaklawn Jockey Club cannot control any issues that may arise. If monies to which I am not entitled are deposited to my account, I authorize Oaklawn Jockey Club to direct the financial institution to return said funds and I authorize the financial institution to act on the Company's direction and to return said funds.

Signature: _____ Date: _____

Mgmt. Sign off: _____	Mgmt. Verified: _____
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