



GOLIGHTLY & LONG, LLC
5820 CAIRO RD
PADUCAH, KY 42001

Direct Deposit Authorization

Please complete the form as indicated below, attach a voided check and return it to the office. Any questions call the office.

Authorization for Direct Deposit to your bank account

Name: _____ SSN: _____ - _____ - _____

Bank: _____ City: _____ State: _____

Account Number: _____

I hereby authorize and request GOLIGHTLY & LONG, hereinafter called GOLIGHTLY & LONG, to initiate credit entries to my **Checking** / **Savings** account at the depository financial institution hereafter called DEPOSITORY as indicated above. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

This authorization is to remain in full force and effect until GOLIGHTLY & LONG has received written notification from me of its termination in such time and in such manner as to afford GOLIGHTLY & LONG and DEPOSITORY a reasonable opportunity to act on it.

Signature

Date

Please attach a voided check in the box below:

Note: We must receive a voided check for the bank account you wish for us to use.

VOID-VOID-VOID-VOID

**note- do not use a deposit ticket