

ROADWAY EXPRESS, INC.
 Authorization Agreement for Direct Deposit

F-033
2/06

NAME: _____ FACILITY: _____ SOCIAL SECURITY #: _____
 (Please print)

EMPLOYMENT STATUS: _____ Hourly _____ Salary PAY CYCLE: _____ Weekly _____ Semi-Monthly

- If you would like to direct deposit your net pay in MULTIPLE ACCOUNTS; show a SPECIFIC DOLLAR AMOUNT on line 1 and/or 2; then complete the MAIN ACCOUNT line for the BALANCE.
- If you would like to direct deposit ALL your net pay into ONE ACCOUNT, complete the MAIN account line only.

FINANCIAL INSTITUTION	ROUTING NUMBER <i>REQUIRED for all accounts see back of form for details</i>	ACCOUNT NUMBER	CHECKING (C) SAVINGS(S)	DOLLAR AMT or PERCENTAGE
1. _____	_____	_____	_____	\$ _____
2. _____	_____	_____	_____	\$ _____
MAIN _____	_____	_____	_____	ALL or BALANCE

I hereby authorize Roadway Express, Inc. to initiate credit entries, and if necessary, to initiate debit entries and adjustments for any credit entries in error to my account(s) indicated above; and the financial institution(s) named above to credit and/or debit the same to such account(s).

Please indicate one:
 and allow at
 least 1 week's
 notice

_____ NEW ENROLLMENT
 _____ CHANGE
 _____ CANCEL

SIGNATURE: _____
 DATE: _____

ADDITIONAL INFORMATION

Your authorization agreement will be processed immediately.

ROUTING NUMBER: This is required for all accounts listed. For checking accounts, the routing number is normally the first nine-digit number found on the bottom of your check; or include a voided check with this form. For savings accounts, contact your financial institution for their routing number and to confirm your account number. *Incorrect or missing routing numbers will result in your authorization agreement being returned to you for correction.*

To CHANGE or CANCEL your direct deposit, please complete a new form. To expedite processing, you may fax a copy of your form to PAYROLL DEPT. at FAX NUMBER: (330) 258-6230. To avoid payment delay, please notify Roadway Express, Inc. to change/cancel your direct deposit BEFORE closing your old account(s). Please allow at least one week for your change/cancel to be processed.

Questions may be directed to (330) 384-9000, ext. 5685 or ext. 3582.

If you wish to have your net pay split between more than 3 accounts, complete the front of this form and attach a separate sheet with your additional account information.