

Direct Deposit Form

Please fax to H&G at your earliest convenience.

FAX: 866-600-7398 or 225-644-9985

Employee Name: _____

Bank Name: _____

Bank Address:

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Routing / Transit Number (9 digit number): _____

Bank Account Number: _____

Bank Account Type: Checking Savings

Authorized Signature: _____