UTP Productions Direct Deposit Application

EMPLOYEE NAME: _____ _____ _____
LAST FIRST MI

SOCIAL SECURITY #: _____

LOCAL UNION #: _____

BANK NAME: _____

CIRCLE ONE: CHECKING OR SAVINGS

ACCOUNT NUMBER _____

BANK ROUTING NUMBER _____

SIGNED BY _____ DATE_____

It is advised that you contact your bank to verify your account number and bank routing number for purposes of direct deposit.

Fax to 801 328-1307 or email to payroll@utpgroup.com.