FirstEnergy DIRECT DEPOSIT AUTHORIZATION - PAYCHECK AND EXPENSE REIMBURSEMENTS FORM 91 (REV. 08-12) Page 1 of 2

EMPLOYEE NAME			SAP NO.			
		GAF NU.				
DAYTIME PHONE NO.	LOCATION		CHECK ONE			
			_	NEEKLY	BI-WEEKLY	
	AUTHORIZATIC	ON AGREEMENT				
I authorize FirstEnergy Corp. to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries						
made in error to the account(s) listed below.						
For verification of my bank account information, I have attached a voided check (not a deposit slip), a photocopy of a check, or I have contacted my financial institution for the correct routing number and account number.						
This authorization will remain in effect until my written notification of cancellation or change is received. Direct deposit authorizations will be effective as soon as reasonably possible following receipt by Payroll Services.						
		INT INFORMATION				
FINANCIAL INSTITUTION NAME						
			6	□ S/	AVINGS	
ROUTING NO.		ACCOUNT NO.				
EXPENSE REIMBURSEMENT ACCOUNT INFORMATION						
		EL 🗌 SAME AS PR	IMARY ACCOUNT	INFORMAT	TION	
FINANCIAL INSTITUTION NAME						
			9		AVINGS	
ROUTING NO.		ACCOUNT NO.				
	OTHER ACCOUN					
FINANCIAL INSTITUTION NAME				AMOUNT		
			\$			
ROUTING NO.		ACCOUNT NO.				
OTHER ACCOUNT INFORMATION						
FINANCIAL INSTITUTION NAME				AMOUNT		
			\$			
ROUTING NO.		ACCOUNT NO.				
OTHER ACCOUNT INFORMATION						
FINANCIAL INSTITUTION NAME			G FLAT	AMOUNT		
ROUTING NO.		ACCOUNT NO.				
CHECK HERE IF YOU RECEIVE YOUR PAYROLL VIA DIRECT DEPOSIT AT A U.S. FINANCIAL INSTITUTION AND HAVE THE ENTIRE						
AMOUNT FORWARDED TO A BANK IN ANOTHER COUNTRY.						
SIGNATURE				DATE		
Send completed form and a voided check (not a deposit slip) to						
Payroll Services at J-JOHN or Fax form to 814-534-4083 (400-4083)						
FOR PAYROLL SERVICES USE ONLY						

FOR PATROLL SERVICES USE ONLY				
DATE RECEIVED	DATE ENTERED	ENTERED BY		

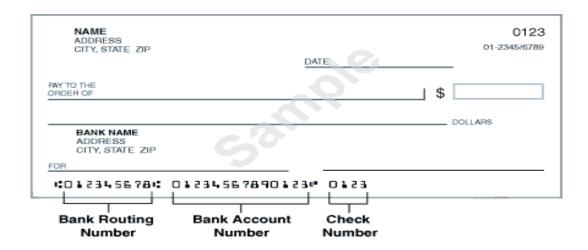
How to Complete the Direct Deposit Authorization Form

- 1. Complete Employee information
- 2. Read Authorization Agreement
- 3. Complete Primary/Expense Reimbursement/Other Account Information

Tips for Completing the Account Information

- Select type of authorization (New, Change, Cancel)
- Enter name of the Financial Institution for each account
- Select type of account (Checking or Savings)
- Enter Flat Amount if Other Account
- Enter 9 digit Bank Routing Number (see example below)
- Enter Bank Account Number (see example below)

Note: Verify the Bank Routing Number and Bank Account Number with your Financial Institution



- 4. Sign and Date the form
- 5. Attach a voided check or a photocopy of a check (not a deposit slip)
- 6. Send completed form to:

Payroll Services at J-JOHN or Fax form to 814-534-4083 (400-4083)