

Direct Deposit Form

To set up your Direct Deposit, simply fill out this form and send it to the HR Office.

Please attach a voided check for each checking account – not a deposit slip.

Below is a sample check detailing the necessary information you will need to obtain to complete this form.

Memo _____ : 0 1 2 3 4 5 6 7 8 : 1 2 3 4 5 6 7 8 9 0 1 0 1		
Routing/Transit # (A 9-digit number always between these two marks)	Checking Account #	Check # (this number matches the number in the upper right corner of the check – not needed for sign-up)

Important! Please read and sign before completing and submitting this form.

I hereby authorize my employer, to deposit any amounts owed me by initiating credit entries to my account(s) at the financial institutions (hereinafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated to my accounts. In the event employer deposits funds erroneously into my account, I authorize my employer to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until employer and Bank have received written notice from me of its termination in such time and in such manner as to afford employer and Bank reasonable opportunity to act on it.

Employee Name (print): _____ Social Security # _____

Employee Signature: _____ Date: _____

New Account Information

Make sure to indicate what kind of account and the amount to be deposited if less than your total net paycheck.

1. Bank Name/City/State: _____
 Routing/Transit #: _____ Account Number: _____
 Checking Savings I wish to deposit: \$ _____ or Entire Net Amount
2. Bank Name/City/State: _____
 Routing/Transit #: _____ Account Number: _____
 Checking Savings I wish to deposit: \$ _____ or Entire Net Amount

Current Account Changes or Closing Information

1. Bank Name/City/State: _____
 Routing/Transit #: _____ Account Number: _____
 Checking Savings I wish to deposit: \$ _____ or Entire Net Amount
 Change Amount Close Account
2. Bank Name/City/State: _____
 Routing/Transit #: _____ Account Number: _____
 Checking Savings I wish to deposit: \$ _____ or Entire Net Amount
 Change Amount Close Account

(Note: The direct deposit will take effect on the second pay period after you have notified Payroll. The first pay period after a change is made to Bank accounts results in a "live check.")