

# Direct Deposit Enrollment Form

## Payroll Manager - Please complete this section

Company Code \_\_\_\_\_ Company Name \_\_\_\_\_ (hereafter referred to as Company)

Payroll Manager Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

To enroll in direct deposit, simply fill out this form and give to your payroll manager. Attach a voided check for each checking account - NOT a deposit slip. If depositing to a savings account, ask your bank to give you the routing/transit # for your account. It isn't always the same number on a savings deposit slip.

Below is a sample check MICR line, detailing where the information necessary to complete this form can be found:



**Check #**  
not needed  
for sign-up

**Routing/Transit #**  
a 9 digit number always  
between these two marks

**Checking Account #**

## Important! Employee - Please read and sign before completing

I hereby authorize Company, acting as Company's payroll processing service, to deposit any amounts owed me by initiating credit entries to my accounts at the financial institutions (hereafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any credit entries initiated by Company to my accounts. In the event that Company deposits funds erroneously into my account, I authorize Company 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 Company and Bank have received written notice from me of its termination in such time and in such manner as to afford Company and Bank reasonable opportunity to act on it.

Employee Name \_\_\_\_\_ Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

## Account Information

Make sure to indicate what kind of account, along with an amount to be deposited if less than your total paycheck.

1. Bank Name / City / State \_\_\_\_\_

Routing/Transit # \_\_\_\_\_ Account # \_\_\_\_\_

Checking  Savings  Other I wish to deposit  \$ \_\_\_\_\_.

2. Bank Name / City / State \_\_\_\_\_

Routing/Transit # \_\_\_\_\_ Account # \_\_\_\_\_

Checking  Savings  Other I wish to deposit  \$ \_\_\_\_\_.

ATTACH VOIDED CHECK(S) not a deposit slip