



## Employee Direct Deposit Initiation\Change Form

This form is for employees who would like to have their paycheck direct deposited into a checking and/or savings account(s).

Client Name: \_\_\_\_\_

Client # \_\_\_\_\_

Employee Name: \_\_\_\_\_

### Complete for Direct Deposit

New Account       Change Account

I would like my paycheck to be deposited to the following account(s):

Bank Name/Routing #	Type	Amount	Account Number
	C S		
	C S		
	C S		

Please attach one of the following for each account:

- \_\_\_\_\_ Void Check
- \_\_\_\_\_ Bank Specification Sheet

Please note: It is the employee's responsibility to verify deposits on a per pay period basis before using funds. Neither your employer nor payroll processor is responsible for bank errors or fees. You may cancel at any time.

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

For office use only

Received \_\_\_\_\_ Set Up \_\_\_\_\_ Initials \_\_\_\_\_