**AUTHORIZATION FOR DIRECT DEPOSIT**

Complete this form for each employee or contractor electing direct deposit.

I authorize \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to deposit my pay automatically to the account(s) indicated below and, if necessary, to adjust or reverse a

deposit for any payroll entry made to my account in error. This authorization will remain in effect until I cancel it in writing and in such time as to afford \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ a reasonable opportunity to act on it.

**Primary Direct Deposit**

Name on bank account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank account number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Checking \_\_\_ Savings \_\_\_

Bank routing number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or entire paycheck: \_\_\_\_

\*Balance of pay to:

\_\_\_\_\_\_\_\_\_ Manual (paper check)

\_\_\_\_\_\_\_\_\_ Secondary account described below

\*Note: Split payments are not available for contractors.

**Secondary Direct Deposit** (balance after direct deposit entry above)

Name on bank account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank account number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Checking \_\_\_ Savings \_\_\_

Bank routing number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Important:** Please attach a voided check for each bank account to which funds should be deposited.

**Employee/Contractor signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Payers:** Don’t send us this form with your Direct Deposit enrollment. Keep for your records.