| **Direct Deposit** |
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Authorization for Direct Deposit

I authorize <your company name here> to deposit my pay automatically into 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 <your company name here> a reasonable opportunity to act on it.

| Name on bank account: | | |  | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Bank account number: | |  | | | Checking | | |  | Savings |  | |
| Bank routing number: | |  | | | | | | | | |
| Amount: $ |  | | | Or entire paycheck | |  |  | | | |

| **Balance of pay to**: | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name on bank account: | | |  | | | | | | | |
| Bank account number: | |  | | | Checking | | |  | Savings |  | |
| Bank routing number: | |  | | | | | | | | |
| Amount: $ |  | | | Or entire paycheck | |  |  | | | |

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

| Employee signature: | |  | | |
| --- | --- | --- | --- | --- |
| Employee *print* name: | | |  | |
| Date: |  | | |  |