

Direct Deposit Enrollment

Employee Direct Deposit Authorization

Account 1 _____

Account 1 type: ☐ Checking ☐ Savings

Bank routing number (ABA number): _____

Account number: _____

Percentage or dollar amount to be deposited to this account: _____

Account 2 (remainder to be deposited to this account) _____

Account 2 type: ☐ Checking ☐ Savings

Bank routing number (ABA number): _____

Account number: _____

attach a voided check for each account here

Authorized signature: _____ Date: _____

Print name: _____

Email address for paystubs: _____