

# Employee Information for Direct Deposit

*please print legibly*

Employee Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

## What Portion of Net Pay Would You Like Deposited?

*You may have all or part of your paycheck deposited directly to your bank account(s).*

*Select one of the following options to indicate the portion of your total paycheck you want deposited.*

100% of Net Pay       Indicated Percent \_\_\_\_\_ %       Indicated Dollar Amount \$ \_\_\_\_\_

## How Do You Want The Direct Deposit Made?

*Please identify up to four bank accounts where you want your check deposited, and indicate the amount or percentage of your paycheck you want deposited in each account. You must enter information in the "Account for the Balance of the Direct Deposit Amount" section.*

**\*\*\*Attach a deposit slip or cancelled check for each account\*\*\***

Account for the Balance of the Direct Deposit Amount:	Account for Percent or Selected Amount Deposit:
Bank Name:	Bank Name:
Bank Routing Number:	Bank Routing Number:
Bank Account Number:	Bank Account Number:
Type of Account: Checking <input type="checkbox"/> Savings <input type="checkbox"/>	Type of Account: Checking <input type="checkbox"/> Savings <input type="checkbox"/>
<input type="checkbox"/> The remainder of the check will be automatically deposited in this account	Indicate Deposit Amount for this Account: (select one)
	<input type="checkbox"/> Percent of Direct Deposit Amount _____ %
	<input type="checkbox"/> Selected Dollar Amount \$ _____

Account for Percent or Selected Amount Deposit:	Account for Percent or Selected Amount Deposit:
Bank Name:	Bank Name:
Bank Routing Number:	Bank Routing Number:
Bank Account Number:	Bank Account Number:
Type of Account: Checking <input type="checkbox"/> Savings <input type="checkbox"/>	Type of Account: Checking <input type="checkbox"/> Savings <input type="checkbox"/>
Indicate Deposit Amount for this Account: (select one)	Indicate Deposit Amount for this Account: (select one)
<input type="checkbox"/> Percent of Direct Deposit Amount: _____ %	<input type="checkbox"/> Percent of Direct Deposit Amount: _____ %
<input type="checkbox"/> Selected Dollar Amount \$ _____	<input type="checkbox"/> Selected Dollar Amount \$ _____

Signature \_\_\_\_\_ Date: \_\_\_\_\_

### For Office Use Only

Date Received: \_\_\_\_\_ Date Prenoted: \_\_\_\_\_ Date Accepted: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_