## DIRECT DEPOSIT AUTHORIZATION FORM

	•	-	ect deposit of employee paychecks to leposit, complete this form.
	•	k and/or personalized de you close or change an a	eposit slip for each account. account.
necessary, debit e	entries and adjustmentry name(s) below, here	nts for any credit entries reinafter called deposito	nitiate credit entries and to initiate, if in error to my account(s) indicated below bry, to credit and/or debit the same as
	New/Modi	ified Enrollment	Cancel Enrollment
<b>Employee Name</b>		_	Employee Social Security Number
Account #1	☐ Checking	☐ Savings	\$ Amount/Percent to Deposit
	Bank Name		Bank Telephone Number
	Bank Account Number	er	Bank Routing Number
Account #2	□ Checking	☐ Savings	\$ Amount/Percent to Deposit
	Bank Name		Bank Telephone Number
	Bank Account Number	er	Bank Routing Number
Account #3	□ Checking	☐ Savings	\$ Amount/Percent to Deposit
	Bank Name		Bank Telephone Number
	Bank Account Number	er	Bank Routing Number
Employee Signature			Date
received written i	notification from me		dnock Developmental Services has ch time and in such manner as to afford on it.
		ECTION FOR PAYROLL	
Bank Number(s): _		;	;