Direct Deposit Signup Sheet

Note: A copy of your voided check from each bank will be required to verify bank routing and account numbers. **Employee Information** Employee Name: ______ Employee's Bank Name/Credit Union: ________ **Direct Deposit Options:** ☐ Yes ☐ No Account Number: _____ Savings Bank Routing Number (9 digits long)/ Transit Number: Amount to deduct: \$ _____Percentage to deduct: _____ ☐ No Account Number: Checking ☐ Yes Bank Routing Number (9 digits long)/ Transit Number: Amount to deduct: \$ _____ Percentage to deduct: _____ If you will be depositing money to another bank, besides the one listed above please fill the information below: Employee's Bank Name/Credit Union: Bank Routing Number (9 digits long)/ Transit Number: **Direct Deposit Options:** Yes No Account Number: Savings Bank Routing Number (9 digits long)/ Transit Number: Amount to deduct: \$ _____ Percentage to deduct: _____ ☐ Yes ☐ No Account Number: _____ Checking Bank Routing Number (9 digits long)/ Transit Number: _____ Amount to deduct: \$ Percentage to deduct: Office Use only: Effective Date: / / Employee ID: Deduction Code: Have you received a copy of the voided check for Employee Name: account verifications: \square Yes □No