



# Direct Deposit Employee Signup Form

**Employee Instructions:**

1. Complete the employee required information section.
2. Complete the Direct Deposit sections to specify where you want your pay deposited.
3. Sign the bottom of the form.
4. Retain a copy of this form. Return the original to your employer.

**Employer Instructions:**

1. Complete the employer required information section.
2. Return this form to your local Paychex office.

EMPLOYEE - Required Information	
PLEASE PRINT	
Employee Name	_____
Social Security No.	_____/____/_____

EMPLOYER - Required Information	
PLEASE PRINT	
Client Name	_____
Office/Client No.	_____/_____
Federal ID No.	_____

Complete for DIRECT DEPOSIT	
I would like my wages/salary deposited to the following bank account(s):	
<b>Bank Account #1</b> <input type="checkbox"/> Checking <input type="checkbox"/> Savings Bank Name _____	<b>Bank Account #2</b> <input type="checkbox"/> Checking <input type="checkbox"/> Savings Bank Name _____
I wish to deposit (check one):	I wish to deposit (check one):
<input type="checkbox"/> Entire Net Pay	<input type="checkbox"/> Entire Net Pay
<input type="checkbox"/> _____ % of Net	<input type="checkbox"/> _____ % of Net
<input type="checkbox"/> Specific Dollar Amount \$ _____00	<input type="checkbox"/> Specific Dollar Amount \$ _____00
Please attach one of the following (check one):	Please attach one of the following (check one):
<input type="checkbox"/> Voided check (deposit slips are not accepted)	<input type="checkbox"/> Voided check (deposit slips are not accepted)
<input type="checkbox"/> Bank letter or specification sheet*	<input type="checkbox"/> Bank letter or specification sheet*
<small>* See your local bank representative.</small>	<small>* See your local bank representative.</small>

ATTACH VOIDED CHECK HERE

Employee Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Return this original form to your employer.