

# Authorization for Direct Deposit

I authorize \_\_\_\_\_ *employer name* \_\_\_\_\_ to deposit my pay automatically to the account(s) indicated below and, if necessary, to adjust or reverse a deposit for any payroll entry made to my account in error. This authorization will remain in effect until I cancel it in writing and in such time as to afford my employer (indicated above) a reasonable opportunity to act on it.

ATTACH VOIDED CHECK HERE FOR ACCOUNT #1

Check one:  checking  savings

Deposit entire paycheck to this account, or specific amount: \$ \_\_\_\_\_

**\*Balance of pay to:**

\_\_\_\_\_ Manual (paper check)

\_\_\_\_\_ Account described below

**\*Note:** Split payments are not available for contractors.

ATTACH VOIDED CHECK HERE FOR  
SECOND ACCOUNT, IF NEEDED

Check one:  checking  savings

**Important:** Please attach a voided check for each bank account to which funds should be deposited.

Employee signature: \_\_\_\_\_

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