EMPLOYEE DIRECT DEPOSIT ENROLLMENT FORM

To enroll in Direct Deposit, simply fill out this form and give it to the Payroll Clerk. Your paycheck may be deposited into any checking or savings account that you choose, at any bank. **Attach a voided check for each Checking Account** – not a deposit slip. If depositing into a **Savings Account**, ask your bank to give you the Routing/Transit Number for your account. This will help ensure that you are paid correctly.

Below is a sample check MICR line, detailing where the information necessary to complete this form can be found.

John Q. Smith

55 Maple Street 555-1234 Hometown, NY 55009

PAY TO TO		/01	(D)	\$ DOLLARS
FOR				
1:1234	56789	09876543	5101534	99999
Bank Routi	ng Number	Checking Acc	ount Number	Check Number
(4.0.11.11	,			
(A 9-digit number always Between these two marks)				(This number matches the number in the upper right corner of the check – not needed for sign-up.)
Important! Please re I hereby authorize my et and/or savings accounts	mployer to initiate F	Primepoint to credit an	d debit entries to the f	ollowing personal checking direct deposit" payroll.
Employee Name:			Social Security #	
Employee Signature:			Date:	
Account Information	n			
Make sure to indicate wh The last item must be for re				
1. Bank Name:				
Routing Number:			Account Number:	
□Checking	□Savings □Other	I wish to deposit: \$	6or 🗆	Entire New Amount
2. Bank Name:				
Routing Number:			Account Number:	
□Checking	□Savings □Other	I wish to deposit: \$	6or 🗆	Entire New Amount
3. Bank Name:				
Routing Number:			Account Number:	
□Checking	□Savings □Other	I wish to deposit: \$	or □	Entire New Amount

99999

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