

Employee Direct Deposit Enrollment Form

To enroll in Full Service Direct Deposit, fill out this form. 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. It isn’t always the same as the number on a savings deposit slip. This will help ensure that you are paid correctly. The first set of numbers located at the bottom number of your check is the Transit Number. The second set of numbers on the bottom of the check is the Checking Account Number. The third set of numbers is the specific check number.

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**Please read and sign before completing and submitting**.

I hereby authorize Accent on Family Care Services (hereinafter “ACCENT”) to deposit any amounts owed me by initiating credit entries to my account(s) at the financial institutions (hereinafter “Bank”) indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by ACCENT to my accounts. In the event that ACCENT deposits funds erroneously into my account, I authorize ACCENT to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until ACCENT and Bank have received written notice from me of its termination in such time and in such manner as to afford ACCENT and Bank reasonable opportunity to act on it.

Employee Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**ACCOUNT INFORMATION**:

The last item must be for the remaining amount owed to you. Make sure to indicate what kind of account, along with amount to be deposited if less than your total net pay check.

Bank Name/City/State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Routing/Transit#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Checking\_\_\_\_\_ Savings\_\_\_\_\_ Other\_\_\_\_\_ I wish to deposit $\_\_\_\_\_\_\_\_\_\_\_\_\_ or entire amount\_\_\_\_\_\_

Staple voided check or copy of check here: