



Direct Deposit Account Initiation/Change Form

This form is used for beginning direct deposits and changing the account(s) of deposit.

New Account Change Account Additional Account Cancel DD

Name _____

Last five digits of your Social Security Number _____

I would like my wages deposited to the following bank account(s):

Bank Account #1

Checking Savings

Bank Name _____

I wish to deposit (check one):

entire net pay

specific amount \$_____.00

Attach a voided check or bank specification letter below

Bank Account #2

Checking Savings

Bank Name _____

I wish to deposit (check one):

entire net pay

specific amount \$_____.00

Attach a voided check or bank specification letter below

Employee Signature