



# DIRECT DEPOSIT WORKSHEET

Client Name: \_\_\_\_\_

Client #: \_\_\_\_\_

Employee Name: \_\_\_\_\_

New Employee

Existing Employee

### ACCOUNT ONE

<input type="checkbox"/> Savings <input type="checkbox"/> Checking \$ _____ or % _____ For full net, Indicate 100%												
Bank Name												
Name on Account												
Routing & Transit Number (9 Digits)												
Account Number												

Attach Voided Check Here  
(Deposit Slip if Savings)

Write 1 on Check

### ACCOUNT TWO

<input type="checkbox"/> Savings <input type="checkbox"/> Checking \$ _____ or % _____ For full net, Indicate 100%												
Bank Name												
Name on Account												
Routing & Transit Number (9 Digits)												
Account Number												

Attach Voided Check Here  
(Deposit Slip if Savings)

Write 2 on Check

### ACCOUNT THREE

<input type="checkbox"/> Savings <input type="checkbox"/> Checking \$ _____ or % _____ For full net, Indicate 100%												
Bank Name												
Name on Account												
Routing & Transit Number (9 Digits)												
Account Number												

Attach Voided Check Here  
(Deposit Slip if Savings)

Write 3 on Check

I authorize Paycor, Inc., acting on behalf of my employer, to initiate electronic credit entries and, if necessary, debit entries to reverse erroneous credit entries to my account(s). It is agreed that these deposits will be made in accordance with the rules of the National Automated Clearing House Association (NACHA). This authorization will remain in effect until Paycor, Inc., has received written notification from me of its termination in such time and in such a manner as to afford Paycor, Inc. and the bank a reasonable opportunity to act upon the termination request.

<b>Employee Signature:</b> _____	<b>Date:</b> _____
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To be retained by Employer. Keep in your employee files. This form may be photocopied.