SERVANTHR
Human Resources that Serve!

PAYROLL DIRECT DEPOSIT AUTHORIZATION FORM-REQUIRED

ENROLLMENT TYPE: _____ **New Enrollment** _____ **Change Current Status**

Employee Name: _____ Soc. Sec. #: _____

Worksite Employer: _____

I hereby authorize Servant HR to initiate credit entries and to initiate if necessary, debit entries and adjustments for any credit entries in error to my account indicated below and the depository name below hereinafter called Depository, to credit and/or debit the same entries to such account.

Depository Information

	Bank Checking	Bank Savings	Credit Union Checking	Credit Union Savings	Other Institution
Account Num.					
ABA/Transit #					
Dollar $ or %					
Bank Name					
City					
State					
Phone					

Note: Funds transferred by electronic transmission normally post to accounts one to two banking days after payroll is processed. Employees remain responsible for verifying that their funds are deposited, clear and are available, prior to writing checks or debiting account. **Always examine pay stub to verify money will be deposited and you have not received a "live" check.** Also, note that your first and last paycheck may not be direct deposit.

This authority is to remain in full force and effect until Servant HR has received written notification from me to terminate in such time and in such manner as to afford Servant HR and Depository a reasonable opportunity to act on it.

Employee Signature: _____ **Date:** _____

SAMPLE

ATTACH VOIDED CHECK SLIP HERE 0001

Address _____ 19 _____
PAY TO THE ORDER OF _____ $ _____

_____ DOLLARS

Memo _____ _____
signature

☒ 028809525 ☒ 1157650295085 * 0001
Routing Number Account Number Check Number