



Direct Deposit/Access Card Employee Signup Form

Employee Instructions:

1. Complete the employee required information section.
2. Complete the Direct Deposit, Access Card, or both sections to specify where you want your pay deposited.
3. Sign the bottom of the form.
4. Retain a copy of this form. Return the original to your employer.

EMPLOYEE - Required Information	
<i>PLEASE PRINT</i>	
Employee Name	_____
Social Security No.	_____/_____/_____

Employer Instructions:

1. Complete the employer required information section.
2. Return this form to your local Paychex office.

EMPLOYER - Required Information	
<i>PLEASE PRINT</i>	
Client Name	_____
Office/Client No.	_____/_____
Federal ID No.	_____

Complete for DIRECT DEPOSIT	
I would like my wages/salary deposited to the following bank account(s):	
Bank Account #1 <input type="checkbox"/> Checking <input type="checkbox"/> Savings Bank Name _____	Bank Account #2 <input type="checkbox"/> Checking <input type="checkbox"/> Savings Bank Name _____
I wish to deposit (check one):	I wish to deposit (check one):
<input type="checkbox"/> Entire Net Pay	<input type="checkbox"/> Entire Net Pay
<input type="checkbox"/> _____ % of Net	<input type="checkbox"/> _____ % of Net
<input type="checkbox"/> Specific Dollar Amount \$ _____00	<input type="checkbox"/> Specific Dollar Amount \$ _____00
Please attach one of the following (check one):	Please attach one of the following (check one):
<input type="checkbox"/> Voided check (deposit slips are not accepted)	<input type="checkbox"/> Voided check (deposit slips are not accepted)
<input type="checkbox"/> Bank letter or specification sheet* <small>* See your local bank representative.</small>	<input type="checkbox"/> Bank letter or specification sheet* <small>* See your local bank representative.</small>

Employee Signature _____

Date ____/____/____

Return this original form to your employer.