

[INSERT COMPANY NAME & LOGO]

Once you've made the changes (indicated in green), provide this form to employees so they can set up their paycheck for Direct Deposit. They need to complete the form and give it back to you before you can begin direct depositing their paycheck. [DELETE THIS SECTION BEFORE DISTRIBUTING]

Electronic Funds Transfer (EFT) Form

Employee Information			
Name:		SSN:	
Address:			
City, State, ZIP:		Phone:	

Please Attach a Voided Check [Voided check not necessary, but recommended]

Bank Information	
Bank Name:	
Name on Account:	
Account #:	
Routing #:	
Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings

Authorization Agreement: I hereby authorize [Insert Company Name] to deposit my paycheck directly into the above mentioned account. This authority will remain in effect until I have given written notice that I am terminating this contract, or until [Insert Company Name] has notified me that this deposit service has been discontinued. I understand that I must give advanced notice to allow reasonable time for my instruction to be executed. If an incorrect deposit should be made into my bank account, I authorize my bank and [Insert Company Name] to make the appropriate adjustment(s).

Employee Signature

Date