

**Paychex Use Only**

Client Account Number \_\_\_\_\_  
Worker Number \_\_\_\_\_  
PRS \_\_\_\_\_  
Date \_\_\_\_\_  
Verified By \_\_\_\_\_  
Scanning instructions are located  
in Paychex Procedures.



**Direct Deposit Signup Form**

**Worker Instructions:**

1. Complete the "WORKER - Required Information" section.
2. Complete the Direct Deposit section to specify where you want your pay deposited.
3. Sign the bottom of the form.
4. Retain a copy of this form for your records. Return the original to your employer.

**Employer Instructions:**

1. Complete the "EMPLOYER - Required Information" section.
2. Return this form to your local Paychex office.\*  
\*See below for acceptable bank documentation. **Deposit slips are not accepted.**

**WORKER – Required Information**

PLEASE PRINT

Worker Name \_\_\_\_\_  
Last four digits of Social Security Number \_\_\_\_\_

**EMPLOYER – Required Information**

PLEASE PRINT

Company Name \_\_\_\_\_  
Service Location/Client Acct. Number \_\_\_\_\_  
Federal ID Number \_\_\_\_\_

**Complete for Direct Deposit and Sign Below**

I authorize my employer to deposit my wages/salary to the following bank account(s):

**Bank Account #1**

- Checking**  
Bank Name \_\_\_\_\_
- Savings**  
Bank Name \_\_\_\_\_
- Chase Pay Card Plus**  
*Please complete the attached application if you would like to sign up for Chase Pay Card Plus.*

**I wish to deposit (check one):**

- Remainder of Net Pay
- \_\_\_\_\_ % of Net
- Specific Dollar Amount \$ \_\_\_\_\_ .00

**Please attach one of the following for Checking or Savings accounts (check one):**

- Voided check (deposit slips are not accepted)**
- Bank letter or specification sheet\***

\*See your local bank representative

**Bank Account #2**

- Checking**  
Bank Name \_\_\_\_\_
- Savings**  
Bank Name \_\_\_\_\_
- Chase Pay Card Plus**  
*Please complete the attached application if you would like to sign up for Chase Pay Card Plus.*

**I wish to deposit (check one):**

- Remainder of Net Pay
- \_\_\_\_\_ % of Net
- Specific Dollar Amount \$ \_\_\_\_\_ .00

**Please attach one of the following for Checking or Savings accounts (check one):**

- Voided check (deposit slips are not accepted)**
- Bank letter or specification sheet\***

\*See your local bank representative

**Worker Signature** \_\_\_\_\_ **Date** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

By signing above, I am agreeing that I am either the accountholder or have the authority of the accountholder to authorize my employer to make direct deposits into the named account.

**Accountholder Signature** \_\_\_\_\_

(If worker doesn't have authority to authorize deposits to the accountholder's account.)