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### Lakeshore Direct Deposit Signup Form

**Employee Instructions:**

1. Complete the "EMPLOYEE-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. Attach back up documentation for ALL accounts listed below.
5. Retain a copy of this form for your records. Return the original to your employer.

<b>EMPLOYEE – Required Information</b>
<p>Worker Name: _____</p> <p>Last four digits of Social Security Number: _____</p>

**Complete for Direct Deposit and Sign Below****I authorize my employer to deposit my wages/salary to the following bank account(s):**

<u>Bank Account #1:</u>	<u>Bank Account #2:</u>
<p><input type="checkbox"/> <b>Checking</b> Bank Name _____</p> <p><input type="checkbox"/> <b>Savings</b> Bank Name _____</p> <p>I wish to deposit (check one):</p> <p><input type="checkbox"/> Remainder of Net Pay</p> <p><input type="checkbox"/> _____ % of Net</p> <p><input type="checkbox"/> Specific Dollar Amount \$_____.00</p> <p><b>Please Attach one of the following for Checking or Savings Accounts:</b>            -Voided Check (deposit slips are not accepted)            -Bank Letter or specification sheet (see your local bank representative)</p>	<p><input type="checkbox"/> <b>Checking</b> Bank Name _____</p> <p><input type="checkbox"/> <b>Savings</b> Bank Name _____</p> <p>I wish to deposit (check one):</p> <p><input type="checkbox"/> Remainder of Net Pay</p> <p><input type="checkbox"/> _____ % of Net</p> <p><input type="checkbox"/> Specific Dollar Amount \$_____.00</p> <p><b>Please Attach one of the following for Checking or Savings Accounts:</b>            -Voided Check (deposit slips are not accepted)            -Bank Letter or specification sheet (see your local bank representative)</p>

**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:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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