

Direct Deposit Bank Account Verification Form

Instructions: Please complete all fields below to authorize direct deposit payments. This form must be printed, signed, and submitted to the Payroll Department along with a voided check or bank verification letter.

1. Employee / Recipient Information

Full Name (First, Middle, Last):	<input type="text"/>
Employee ID / Social Security Number (Last 4 digits):	<input type="text"/>
Street Address:	<input type="text"/>
City, State, Zip Code:	<input type="text"/>
Phone Number:	<input type="text"/>
Email Address:	<input type="text"/>

2. Bank Account Information

Bank Name:	<input type="text"/>
Routing Number (9 Digits):	<input type="text"/>
Account Number:	<input type="text"/>
Account Type (Checking or Savings):	<input type="text" value="Type 'Checking' or 'Savings'"/>

3. Authorization and Signature

I hereby authorize my employer to deposit my net pay directly into the bank account indicated above. I also authorize my employer to adjust any overdeposits made to my account in error. This authorization will remain in effect until I provide written notification of its termination.

Authorized Signature (Sign after printing):	<input type="text" value="Sign by hand here"/>
Date (MM/DD/YYYY):	<input type="text"/>

Note to Payroll Administrator: Please verify the routing and account numbers against a voided check or an official bank letter before processing.