

# **Direct Deposit Enrollment Form**

Clarity Direct Deposit is Powered by



# Your Pay Goes into the Bank. You Don't.

Here's a new employee benefit that takes the hassle out of payday. Full Service Direct Deposit automatically deposits your paycheck into the bank account(s) you select. Distribute your pay among multiple accounts (checking, savings, Christmas clubs, investment accounts, etc.) at different financial institutions. You won't have to stand in long check-cashing lines to deposit your pay anymore. Your pay will be in your account(s), ready for immediate use—even if you can't get to the bank.

## Full Service Direct Deposit is...

- Convenient. It deposits your net pay automatically to the bank account(s) of your choice. Full Service Direct Deposit also makes your money instantly available on payday for withdrawal or check writing—even if you aren't in the office on payday!
- Safe. Full Service Direct Deposit eliminates the chance of lost, stolen, or damaged paychecks.
- Confidential. Full Service Direct Deposit reduces handling of your personal payroll information by others.
- Reliable. Full Service Direct Deposit provides complete paystub information and deposit confirmation every payday.
- Free. All these benefits are offered to employees at no additional charge.

#### How to Enroll...

To sign up for Full Service Direct Deposit, complete the enrollment form and give it to your payroll manager. Take advantage of Full Service Direct Deposit today!

### Important! Please read and sign before completing and submitting.

I hereby authorize Employer, either directly or through its payroll service provider, to deposit any amounts owed me, by initiating credit entries to my account at the financial institution (hereinafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by Employer, either directly or through its payroll service provider, to my account. In the event that Employer deposits funds erroneously into my account, I authorize Employer, either directly or through its payroll service provider, to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until Employer and Bank have received written notice from me of its termination in such time and in such manner as to afford Employer and Bank reasonable opportunity to act on it.

Em	ployee Name:	
Em	ployee Signature:	Date:
The		ou. To distribute to more accounts, please complete another form.  ount to be deposited, if less than your total net paycheck.
1.	Bank Name/City/State:	
	Routing/Transit #:	Account Number:
	☐ Checking ☐ Savings ☐ Other	I wish to deposit: \$ or
2.	Bank Name/City/State:	
	Routing/Transit #:	Account Number:
	☐ Checking ☐ Savings ☐ Other	I wish to deposit: \$ or
3.	Bank Name/City/State:	
	Routing/Transit #:	Account Number:
	☐ Checking ☐ Savings ☐ Other	I wish to deposit: \$ or

## ATTENTION EMPLOYEE:

To ensure accuracy, attach a voided check(s) for applicable accounts listed above to this form.