

**Paychex Use Only**

Client Account Number \_\_\_\_\_ Date \_\_\_\_\_  
Worker Number \_\_\_\_\_ Time \_\_\_\_\_  
PRS \_\_\_\_\_ Contact \_\_\_\_\_  
Verified By \_\_\_\_\_ CSS Initials \_\_\_\_\_

Scanning instructions are located in Paychex Procedures.

**PAYCHEX®**  
**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.

**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 slip (only accepted if the verbiage "ACH R/T" appears before the routing number)**
- Bank letter or specification sheet (the signature of your local bank representative MUST be included)**

**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 slip (only accepted if the verbiage "ACH R/T" appears before the routing number)**
- Bank letter or specification sheet (the signature of your local bank representative MUST be included)**

**Employer Section Only**

If bank documentation provided is different from what is listed above, the following must be completed by the employer:

I confirm that the above named employee has added or changed a bank account for direct deposit transactions processed by Paychex, Inc.

**Employer Signature** \_\_\_\_\_

**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.)