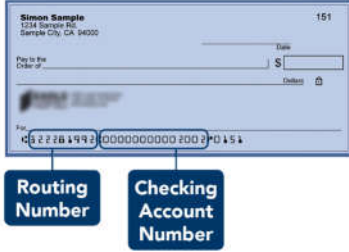


I (print name) \_\_\_\_\_ employed at \_\_\_\_\_  
 authorize Elite Payroll Solutions to electronically deposit, on my behalf to the account(s) below:

**Sample Check for Reference:**



**Please indicate type of request:**

Add    Change    Delete

Attach Voided Check Here

Bank Name: \_\_\_\_\_

ABA Routing/Transit Number (9 digits):

Account Number:

% Percentage of Net Pay (default **100%**): \_\_\_\_\_%   **or**   Flat Amount: \$ \_\_\_\_\_

Account Type:    Checking    Savings

Attach Voided Check Here

Bank Name: \_\_\_\_\_

ABA Routing/Transit Number (9 digits):

Account Number:

% Percentage of Net Pay (default **100%**): \_\_\_\_\_%   **or**   Flat Amount: \$ \_\_\_\_\_

Account Type:    Checking    Savings

*\*NOTE: You are allowed to make deposits to only two checking and two savings accounts. Most Credit Union deductions are considered one savings account. Attach a VOIDED check(s), bank letter or a copy of the Financial Institution I.D. Card (for savings accounts) and verify the ABA routing transit number and bank account number for all of the account(s) listed above. **Please allow 2-3 pay periods for processing.***

I hereby authorize and agree that in the event that Elite Payroll Solutions deposits funds erroneously into my account, I authorize Elite Payroll Solutions to debit my account, not to exceed the original amount of the erroneous credit.

If I change bank or bank accounts, I am fully responsible for immediately notifying the Payroll Department of the change.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Social Security Number:  -  -

**\*\*\* Incomplete or invalid information will delay the start of your direct deposit or savings amount(s) \*\*\***