



## Employee Direct Deposit Authorization

Employer: \_\_\_\_\_

Employee Name \_\_\_\_\_

I authorize my employer together with Access Payroll Services of N.E. LLC and their agents including Intercept Corporation, to initiate the electronic entries necessary to directly deposit all or a portion of my net pay each pay period according to the following allocations:

**Check box below arrow to have your ( Entire NET ) deposited into one bank account.**

↓	<b>NET</b>	<u>Checking</u>	<u>Savings</u>	<u>Bank Name</u>	<u>9 Digit Routing #</u>	<u>Account #</u>
<input style="width: 100%; height: 100%;" type="checkbox"/>						

Or → fill in the boxes below to deposit your paycheck into more than one account.

List SEQUENCE	FIXED Amt.	Percentage	(Circle One)		Bank Name	9 Digit Routing #	Account #
			Checking	Savings			
1	\$	%	Checking	Savings			
2	\$	%	Checking	Savings			
3	\$	%	Checking	Savings			
4	\$	%	Checking	Savings			
5	\$	%	Checking	Savings			

- Amounts will be deposited in the sequence noted above and a check will be cut for any amounts remaining.
- Please verify routing and account numbers for both savings and checking accounts listed and **attach a voided check** for all checking accounts.
- Access Payroll Services of N.E. LLC and your employer are not responsible for any bank errors or fees.
- This direct deposit request usually is reflected on the second pay period following receipt.
- You may cancel or temporarily hold your direct deposit at anytime.
- All changes and request must be initiated by your company authorized payroll representative.
- I understand that adjustments and/or reversing entries may be made to this account to insure an accurate and balanced accounting of all transactions.

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

**Fax to: 603-621-5147**

1. Keep copy in employees' file.
2. Give copy to employee