

Direct Deposit Signup Form

Worker Instructions:

1. Complete The “WORKER – Required Information Section.
2. Complete the Direct Deposits 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 record. Return the original to your employer

Employer Instructions:

1. Complete the “EMPLOYER –Required Information” Section.
2. Return this form to your specialist

WORKER- Required Information
<p>Please Print Worker Name _____</p> <p>Social Security Number ____ - ____ - _____</p>

EMPLOYER – Required Information
<p>Please Print Client Name</p> <p>_____</p>

Complete for DIRECT DEPOSIT	
<p>I authorize my employer to deposit my wages/salary to the following bank account(s)</p>	
<p>Bank Account # 1 <input type="checkbox"/> Checking <input type="checkbox"/> Savings</p> <p>Bank Name _____</p> <p>Account Number _____</p> <p>I wish to deposit (check one):</p> <p><input type="checkbox"/> Entire Net Pay</p> <p><input type="checkbox"/> ____ % of Net Pay</p> <p><input type="checkbox"/> Specific Dollar Amount \$ _____.00</p> <p>Please Attach one of the following (check one):</p> <p><input type="checkbox"/> Voided check (deposit slips are not accepted)</p> <p><input type="checkbox"/> Bank letter or specification sheet*</p> <p><small>* See your local representative.</small></p>	<p>Bank Account # 1 <input type="checkbox"/> Checking <input type="checkbox"/> Savings</p> <p>Bank Name _____</p> <p>Account Number _____</p> <p>I wish to deposit (check one):</p> <p><input type="checkbox"/> Entire Net Pay</p> <p><input type="checkbox"/> ____ % of Net Pay</p> <p><input type="checkbox"/> Specific Dollar Amount \$ _____.00</p> <p>Please Attach one of the following (check one):</p> <p><input type="checkbox"/> Voided check (deposit slips are not accepted)</p> <p><input type="checkbox"/> Bank letter or specification sheet*</p> <p><small>* See your local representative.</small></p>
<p>I hereby authorize Eldercare Solutions Inc. to deposit my wages/salary into the accounts listed above. Any changes must be in writing on the Direct Deposit Form. I understand that it may take up to 30 days before my deposit request is initiated. I am aware that my final paycheck will be issued as a live check and not as a direct deposit.</p> <p>Worker Signature _____ Date ____/____/____</p> <p>By signing above, I am agreeing that I am either the accountholder or have authority of the accountholder to authorize my employer to make direct deposits into the named account.</p> <p>Accountholder Signature _____</p> <p style="text-align: center;"><small>(If worker doesn't have authority to authorize deposits to the accountholder's account)</small></p>	