

Direct Deposit Authorization



Employee Name _____

Phone _____

Email _____

Please directly deposit the following amount/percentage of my check into the following account(s):

Bank Name _____

Select one:

Bank Routing Number _____

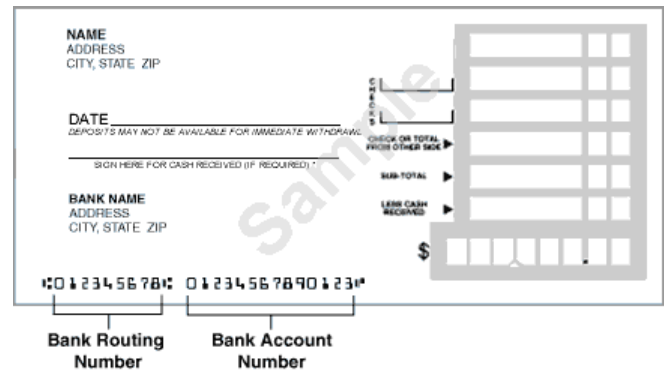
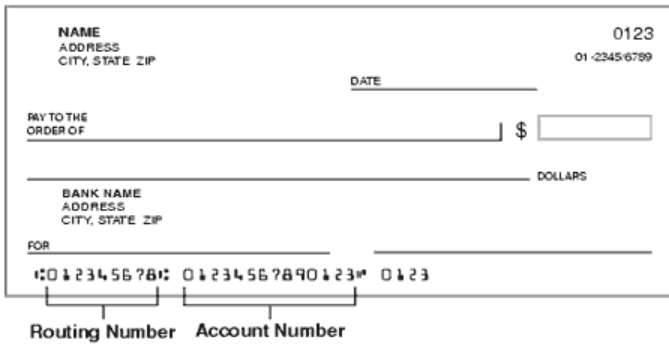
I authorize getting digital W2 forms.

Account Number _____

I **DO NOT** authorize getting digital W2 forms.

Amount of Deposit _____

How to find your bank routing & account numbers on a check or savings deposit slip.



Employee Signature _____ Date _____