



### Direct Deposit Authorization / Change Form

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

Region/District \_\_\_\_ / \_\_\_\_

Employee ID # \_\_\_\_\_

Pay Cycle (Circle One): Bi-Weekly, Hourly, Semi-Monthly or Monthly

#### Net Pay Direct Deposit

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

For all direct deposits (Primary Account): Effective Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Transit Number Account Number

\_\_\_\_\_

Account Type (select one) \_\_\_\_\_ Checking \_\_\_\_\_ Savings \_\_\_\_\_ Credit Union

For additional direct deposits: Effective Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Transit Number	Account Number	Account Type	Amount / Percent
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\_\_\_\_\_

Transit Number	Account Number	Account Type	Amount / Percent
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\_\_\_\_\_

Transit Number	Account Number	Account Type	Amount / Percent
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\_\_\_\_\_

Transit Number	Account Number	Account Type	Amount / Percent
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\_\_\_\_\_

You must choose either a flat amount or a percentage of net pay to be deducted from each payroll.

Note: The bank selected to receive the direct deposit must be a member of the National Automated Clearing House Association (NACHA).

I \_\_\_\_\_ authorize UPS to initiate credit entries and correcting debit entries, if necessary, to the bank account noted above. This authority is to remain in full force until UPS has received written notification from me of its termination. Written termination shall be received in such time as to afford UPS, and the bank a reasonable opportunity to act on it.

Signed \_\_\_\_\_ Date \_\_\_\_\_

NOTE: When changing your Direct Deposit from one account to another, there will be a time delay in the transfer of account information. During this time period the employee will receive an actual paycheck. This check must be deposited or cashed by the employee. Direct Deposit funds are available on Friday.

\*\*\*\*Please attach a voided check and return to your payroll department\*\*\*\*