

EMPLOYEE



ENROLLMENT AUTHORIZATION



CLIENT INFORMATION

OFFICE		FRAN #	
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EMPLOYEE INFORMATION

IMPORTANT

EMPLOYEE		EMPL #	
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I wish to have my employer deposit my net pay and/or a fixed amount(s) each payday directly to my account(s) as indicated. I agree to notify my employer immediately of any changes to the information so that my pay may be properly distributed. I understand that in the event my employer notifies my financial institution that I am not entitled to the funds deposited to my account, my bank is authorized to debit my account for the amount of the adjustment. I will provide my employer a two week notice before closing bank accounts.

This authorization remains in full force until PayPLUS receives written termination notification from the employee.	SIGNATURE 	DATE
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SUBMISSION TYPE

NEW ADDITIONAL CHANGE DELETE

BANK INFORMATION

BANK NAME									ACCOUNT TYPE	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS							
ROUTING NUMBER									DEPOSIT	<input type="checkbox"/> NET PAY							
THE BANK ROUTING NUMBER MUST BE NINE (9) DIGITS IN LENGTH										<input type="checkbox"/> FIXED AMOUNT \$ _____							
ACCOUNT NUMBER																	
BANK ACCOUNT NUMBER CAN BE ANY LENGTH BUT ALL DIGITS MUST BE INCLUDED ABOVE																	

VOIDED CHECK

- ✓ A COPY OF A **VOIDED CHECK** IS ENCOURAGED TO ENSURE ACCURATE BANK AND ACCOUNT INFORMATION IS BEING PROVIDED.
- ✓ PLEASE NOTE THAT ALL NEW DIRECT DEPOSITS ARE **PRE-NOTED** WITH THE EMPLOYEE'S FINANCIAL INSTITUTION PRIOR TO BECOMING ACTIVE IN PAYPLUS. EMPLOYEE MAY RECEIVE ONE CHECK AFTER THIS FORM HAS BEEN SUBMITTED.
- ✓ PRE-NOTING CAN BE **WAIVED** BUT PAYPLUS DOES NOT GUARANTEE THE DIRECT DEPOSIT WILL CLEAR THE EMPLOYEE'S FINANCIAL INSTITUTION WHICH MAY RESULT IN EMPLOYEE NOT RECEIVING THEIR COMPENSATION ON PAY DAY.
- ✓ **WAIVED AUTHORIZATIONS MUST BE RECEIVED BY END OF BUSINESS ON THE DAY BEFORE PROCESSING TO ENSURE ENTRY INTO THE PAYROLL SYSTEM.**

WAIVE PRE-NOTE? YES NO AUTHORIZED BY: _____