

BALANCE POINT

The Next Level of Payroll Solutions

Employee Direct Deposit Enrollment Form

Payroll Manager - Please complete this section and send a copy to Balance Point.

Company Code _____ Company Name _____

Authorized by: _____ Signature _____

To Enroll in full direct deposit, simply fill out this form and give to your payroll manager. Attach a voided check for each checking account - not a deposit slip. If depositing to a savings account, ask your bank to provide you with a spec sheet. The spec sheet should list the Routing/Transit number and account number for your account.

Important - Please read and sign before completing and submitting.

I hereby authorize Balance Point Payroll to deposit any amounts owed to me, as instructed by my employer, by initiating credit entries to my account at the financial institution (hereinafter referred to as "Bank") indicated on this form. Additionally, I authorize Bank to accept and to credit any amounts indicated by Balance Point Payroll to my account. In the the event that Balance Point Payroll deposits funds erroneously into my account or the corresponding payroll is not funded properly, I authorize Balance Point Payroll to debit my account for an amount not to exceed the original amount of the erroneous or unfunded credit.

This authorization shall remain in force and effect until Balance Point Payroll and Bank have received written notice from me of its termination in such time and in such manner as to afford Balance Point Payroll and Bank an opportunity to act.

Employee Name: _____

Employee Signature: _____ Date: _____

Account Information

Please fill out COMPLETELY to ensure accurate and timely payment.

1) Bank Name _____

Routing Transit #: _____ Account Number _____

Checking Savings Other I wish to deposit: \$ _____ or Entire Net Pay

2) Bank Name _____

Routing Transit #: _____ Account Number _____

Checking Savings Other I wish to deposit: \$ _____ or Entire Net Pay

3) Bank Name _____

Routing Transit #: _____ Account Number _____

Checking Savings Other I wish to deposit: \$ _____ or Entire Net Pay

Email Address _____

To receive password protected stub via email employee entire net pay needs to be direct deposited.

Attention Payroll Manager

Please retain a copy for your records and forward a copy to Balance Point Payroll.