DIRECT DEPOSIT WORKSHEET

## Client Name:

$\qquad$
Employee Name:New EmployeeExisting Employee

## ACCOUNT ONE

$\square$ Savings $\square$ Checking
\$ $\qquad$ or \% $\qquad$ For full net, indicate 100\%

Bank Name

Name on Account

| Routing \& Transit Number (9 Digits) |  |  |  |  |  |  |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Account Number |  |  |  |  |  |  |  |  |  |  |  |  |

## ACCOUNT TWO

SavingsChecking\$ $\qquad$ or \% $\qquad$ For full net, indicate 100\%
Bank Name
Name on Account

| Routing \& Transit Number (9 Digits) |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Account Number |  |  |  |  |  |  |  |  |  |  |  |  |  |

## ACCOUNT THREE

SavingsChecking \$ $\qquad$ or \% $\qquad$ For full net, indicate 100\%Bank Name

Name on Account

| Routing \& Transit Number (9 Digits) |
| :--- |
| Account Number |

[^0]$\qquad$ Date: $\qquad$ 1 $\qquad$ 1 $\qquad$


[^0]:    I authorize Paycor, Inc., acting on behalf of my employer, to initiate electronic credit entries and, if necessary, debit entries to reverse erroneous credit entries to my account(s). It is agreed that these deposits will be made in accordance with the rules of the National Automated Clearing House Association(NACHA). This authorization will remain in effect until Paycor, Inc., has received written notification from me of its termination in such time and in such a manner as to afford Paycor, Inc. and the bank a reasonable opportunity to act upon the termination request.

