

Paychex Use Only	
Client Number	_____
Worker Number	_____
PRS	_____
Date	_____
Verified By	_____

# PAYCHEX®

## Direct Deposit Change Form

### Worker Instructions:

1. Complete the "WORKER - Required Information" section.
2. Complete the Direct Deposit section to change your existing payroll information.
3. Sign the bottom of the form.
4. Retain a copy of this form for your records. Return the original to your employer.

### Employer Instructions:

1. Complete the "EMPLOYER - Required Information" section.
2. Return this form to your local Paychex office.

WORKER - Required Information	
<i>PLEASE PRINT</i>	
Worker Name	_____
Last four digits of Social Security Number	_____
Street Address	_____
Apt. # _____ City	_____
State _____ Zip	_____

EMPLOYER - Required Information	
<i>PLEASE PRINT</i>	
Company Name	_____
Office/Client Number	_____
Federal ID Number	_____

## Complete for DIRECT DEPOSIT

Certain accounts may have restrictions on deposits and withdrawals. Check with your bank for more information specific to your account.

Bank Account #1	Bank Account #2	Bank Account #3
<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Account Number* _____	Account Number* _____	Account Number* _____
Bank Name _____	Bank Name _____	Bank Name _____
<input type="checkbox"/> Remove From Direct Deposit	<input type="checkbox"/> Remove From Direct Deposit	<input type="checkbox"/> Remove From Direct Deposit
OR	OR	OR
Change My Deposit Amount To:	Change My Deposit Amount To:	Change My Deposit Amount To:
<input type="checkbox"/> Remainder of Net Pay	<input type="checkbox"/> Remainder of Net Pay	<input type="checkbox"/> Remainder of Net Pay
<input type="checkbox"/> _____ % of Net	<input type="checkbox"/> _____ % of Net	<input type="checkbox"/> _____ % of Net
<input type="checkbox"/> Specific Dollar Amount \$ _____ .00	<input type="checkbox"/> Specific Dollar Amount \$ _____ .00	<input type="checkbox"/> Specific Dollar Amount \$ _____ .00

\* If your bank account number has changed, you must provide a voided check or bank specification sheet.

## Employer Section Only

If bank documentation provided is different from what is listed above, the following must be completed by the employer:

I confirm that the above named employee has added or changed a bank account for direct deposit transactions processed by Paychex, Inc.

Employer Signature \_\_\_\_\_

Worker Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Return this original form to your employer.**

By signing above, I am agreeing that I am either the accountholder or have the authority of the accountholder to authorize my employer to make direct deposits into the named account.

Accountholder Signature \_\_\_\_\_

(if worker's name does not appear on bank documentation)