



To avoid incurring fees for incorrect information
PLEASE ATTACH A VOIDED CHECK or routing and account confirmation from your bank HERE
AS VERIFICATION FOR EACH REQUEST

Payroll Administrator - Please TALK to the employee to ensure this change is authorized.

**Direct Deposit
Employee Authorization**

<u>Company Name:</u>
Employee Name:

I authorize Pay 'n Time HR Services Inc.(PNTHR), it's designated third party, and the financial institution(s) listed below to deposit my pay automatically to the indicated account(s) and to adjust or reverse payments made to my account in error. This authority is to remain in full force and effect until PNTHR and its designated third party receives written notification from the undersigned of its termination in such time and manner as to afford PNTHR, its designated third parties / financial institutions and the undersigned's financial institutions a reasonable opportunity to act on such notification.

Bank/Credit Union	State	Type (Circle One)	\$ or %	Account Number	Routing Number
Example: "Your Bank"	CA	Chkg	100%	E.g., 12345678910	000000000 (nine digits)
		Chkg Sav			
		Chkg Sav			

Please Check One:

<input type="checkbox"/>	New or Additional Direct Deposit		
<input type="checkbox"/>	Change the Bank or Account Number on an Existing Direct Deposit	Account Number to be replaced:	
<input type="checkbox"/>	Change the Amount of an Existing Direct Deposit	Amount was:	Amount changed to:
<input type="checkbox"/>	Other, Please Explain:		

It is my responsibility to verify deposits every per pay period before writing checks against these funds. This authorization can take up to three pay periods to activate. I understand that neither my employer nor Pay 'n Time HR Services is responsible for bank errors or fees.

Signature:

Date: