



## DIRECT DEPOSIT ENROLLMENT, CHANGE AND CANCELLATION FORM

Employer Name: \_\_\_\_\_ #: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Name: \_\_\_\_\_ SSN: \_\_\_\_\_

### INSTRUCTIONS

Read and complete the information below, and provide signature(s) where required. If employee is not the account holder, both the account holder and the employee must sign the form in the designated area below. Fax, email or mail this form to Progressive Employer Management Company (PEMCO).

**In order to start direct deposit, a copy of a voided check or a typed bank letter must be included. Savings deposit slips will not be accepted.**

### ACCOUNT INFORMATION

Bank #1 Name: \_\_\_\_\_

Account #1 Type:  Checking  Savings

Account #1 Number: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Routing number is 9 digits and is typically located at the bottom of your check

Requested Action:  Enroll  Change Existing  Cancel

Deposit Amount:  Net (100%)  Dollar Amount \$ \_\_\_\_\_  Percentage \_\_\_\_\_ %

Bank #2 Name: \_\_\_\_\_

Account #2 Type:  Checking  Savings

Account #2 Number: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Routing number is 9 digits and is typically located at the bottom of your check

Requested Action:  Enroll  Change Existing  Cancel

Deposit Amount:  Net (100%)  Dollar Amount \$ \_\_\_\_\_  Percentage \_\_\_\_\_ %

### EMPLOYEE CONSENT

I authorize PEMCO and the financial institution listed above to credit my account for direct deposit of payroll and if necessary, to initiate debits or adjustments for credits made in error. I agree that such credit (or debit, when applicable) constitutes as payment and receipt of my paycheck. This authority will remain in effect unless I cancel it in writing with PEMCO. If I change my bank or bank accounts, I am responsible for notifying the PEMCO of the change immediately. I understand that any changes, including stopping my direct deposit, must be submitted prior to payroll submission.

The availability of funds is subject to my banking institution's policy and procedures. I will verify that my payroll funds have been deposited, cleared, and are available prior to processing automatic debits, writing checks, and debiting my account against the deposited payroll amount. PEMCO is not responsible for overdrafts or fees on my account.

If I am not an authorized account holder with this banking account, I have obtained the account holder's signature immediately below.

Account Holder Signature: \_\_\_\_\_ Employee Signature: \_\_\_\_\_