



# ARCHDIOCESE OF ATLANTA

## Direct Deposit Signup Form

Employee Name: \_\_\_\_\_ Last four digits of Social Security #: \_\_\_\_\_

### Instructions:

1. Complete the Direct Deposit section(s) to specify where you want your pay deposited.
2. Sign the bottom of the form.
3. Retain a copy for your records.
4. Return the original to the Payroll Manager
5. **Please attach a voided check for each checking account specified or a bank letter or specification sheet.**

	Bank Name	Routing #	Account #	Account Type (Checking/Savings)	Dollar Amount or % of Net
Bank Account # 1					
Bank Account # 2					
Bank Account # 3					
Bank Account # 4					
Bank Account # 5					
Bank Account # 6					

Please sign acknowledging the information provided is accurate:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_