

# People Creating Success, Inc.

## Direct Deposit Enrollment Form

Employee Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Last 4 of SSN: \_\_\_\_\_

**Checking**

Routing #: 



Account #: 


I wish to deposit (select one):

Net Pay                      Specific Dollar Amount: \_\_\_\_\_

Please attach one of the following:

Voided Check

Bank Letter or Specification Sheet

**Savings**

Routing #: 



Account #: 


I wish to deposit (select one):

Net Pay                      Specific Dollar Amount: \_\_\_\_\_

Please attach one of the following:

Voided Check

Bank Letter or Specification Sheet

**Secondary Account - Optional**

Routing #: 



Account #: 


I wish to deposit (select one):

Net Pay                      Specific Dollar Amount: \_\_\_\_\_

Please attach one of the following:

Voided Check

Bank Letter or Specification Sheet

Employee Signature: \_\_\_\_\_