

Company Name: \_\_\_\_\_ Desired Effective Date: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

**Please check one of the following and complete the authorization as applicable:**

- Set up a new direct deposit to the account and in the amount designated below.
- Replace my existing direct deposit from account # \_\_\_\_\_ to the account and in the amount designated below.
- Cancel my existing direct deposit account # \_\_\_\_\_ effective \_\_\_\_\_.

*If funds I am not entitled to be deposited to my account, I authorize the return of these funds to my employer. This authority will remain in effect until two weeks after my AES payroll contact has received this form with "cancel" selected. With this authorization, I release my employer of any liability which might result from having my funds electronically deposited into an account(s) I designate. I understand that I have the option of having my paycheck on the check date. I am voluntarily choosing to have my funds available through direct deposit and understand this does not guarantee deposit of my funds on the check date.*

**I authorize my employer and the financial institution listed below to automatically deposit:**

**Bank #1**

- The following amount of my pay \$ \_\_\_\_\_ or \_\_\_\_\_ % to my Checking Account
- The following amount of my pay \$ \_\_\_\_\_ or \_\_\_\_\_ % to my Savings Account

Bank Name & Location: \_\_\_\_\_ Routing / Transit #: \_\_\_\_\_  
 Checking Account #: \_\_\_\_\_ Savings Account #: \_\_\_\_\_

**Bank #2**

- The following amount of my pay \$ \_\_\_\_\_ or \_\_\_\_\_ % to my Checking Account
- The following amount of my pay \$ \_\_\_\_\_ or \_\_\_\_\_ % to my Savings Account

Bank Name & Location: \_\_\_\_\_ Routing / Transit #: \_\_\_\_\_  
 Checking Account #: \_\_\_\_\_ Savings Account #: \_\_\_\_\_

*In the case of a deposit to a checking account, **attach a voided personal check** imprinted with your name. Temporary checks will not be accepted. In the case of a deposit to a savings account, **attach a voided deposit slip** imprinted with your name. In both instances, it is your responsibility to validate the routing number and account number on the check with your bank for electronic transmission of funds. Please note that the numbers on the slip or check are not generally the same as for electronic transmission. Failure to validate the numbers may result in return of your funds to your employer. In the case your funds are returned, a manual check will be processed.*

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_\_  
**Date**

**AES Use Only**

Number of Pre-Notes: \_\_\_\_\_

Date of First Deposit: \_\_\_\_\_

Entered By: \_\_\_\_\_

Date Entered: \_\_\_\_\_