

Direct Deposit enrollment form

To enroll in Direct Deposit, simply fill out this form and give it to your employer. Some employers require a voided check to be attached.

Company/Employer Name

I authorize the above named Company/Employer to initiate credit entries to the account(s) indicated below, and to credit the same to such account. I acknowledge that the origination of ACH transaction to my account must comply with the provisions of U.S. law.

Account information

Primary Direct Deposit account

If no additional accounts are specified, 100% of your net pay to Truist will be deposited into the Primary Account.

Priority	Bank name	Transit routing number Must be nine digits	Account number	Amount	(Check one)
999	Truist Bank			\$	Checking Savings

Adding additional Direct Deposit accounts

Distributions are made to accounts according to the priority specified. Accounts with the lowest priority numbers are funded first, with the balance of your pay deposited into your Primary Account.

Priority	Bank name	Transit routing number Must be nine digits	Account number	Amount	(Check one)
1	Truist Bank			\$	Checking Savings
2	Truist Bank			\$	Checking Savings

If monies to which I am not entitled are deposited to my account, I authorize my Company/Employer to direct the financial institution to return said funds.

This authorization is to remain in full force and effect until the Company/Employer has received written notification from me of its termination in such manner as to afford Company/Employer and Truist Bank a reasonable opportunity to act.

Employee name	Employee ID
Signature	Date

Memo _____

+ 1 06 1000 104 1 2345678 0101

LOOK FOR FRAUD-DETECTING FEATURES INCLUDING THE SECURITY SQUARE AND HEAT-REACTIVE INK. DETAILS ON BACK.

Routing number
Account number