

ADP PAYROLL

To enroll in Full Service Direct Deposit, simply complete this form and submit electronically it to HR. Also attach a Voided Check, not a deposit slip. This will help ensure that you are paid correctly.

Below is a sample check MICR line, detailing where the information can be found that is necessary to complete this form:

The diagram shows a horizontal rectangular box representing the top of a check. Inside the box, from left to right, are: the word "Memo" followed by a horizontal line; a vertical line followed by a colon and a small square box; a vertical line followed by a colon; the text "|| =" followed by two small square boxes. Three callout boxes with arrows point to these elements: the first callout box points to the first vertical line and square, the second callout box points to the second vertical line, and the third callout box points to the two small square boxes after "|| =".

Memo_____

| : □

| :

|| = □ □

Routing/Transit Number
(A 9-digit number always between these two marks)

Checking Account Number

Check Number
(this number matches the number in the upper right corner of the check – not needed for sign-up)

IMPORTANT!

I hereby authorize ADP to deposit any amounts owed me, as instructed by Your Design Online, LLC, by initiating credit entries to my accounts at the financial institutions (hereinafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by ADP to my accounts. In the event that ADP deposits funds erroneously into my account, I authorize ADP to debit my account for an amount not to exceed the original amount of the erroneous credit. This authorization is to remain in full force and effect until ADP and Bank have received written notice from me of its termination in such time and in such manner as to afford ADP and Bank reasonable opportunity to act on it.

Contractor Name: SSN/TIN:

DBA Name, if any: _____ Date: _____

Contractor Signature: _____

Account Information

Complete at least the first set of Bank information below. If you would like money to be deposited into separate accounts, complete both sets of information below.

1) Bank Name/City/State: _____

Routing Transit #: _____ Account #: _____

Checking _____ Savings _____ Other _____ I wish to deposit \$ _____ or Entire Amount _____

2) Bank Name/City/State (optional): _____

Routing Transit #: _____ Account #: _____

Checking ___ Savings ___ Other ___ I wish to deposit \$_____.___ or Remaining Amount ___

Attach copy of Voided Check #1

Attach copy of Voided Check #2 (optional)