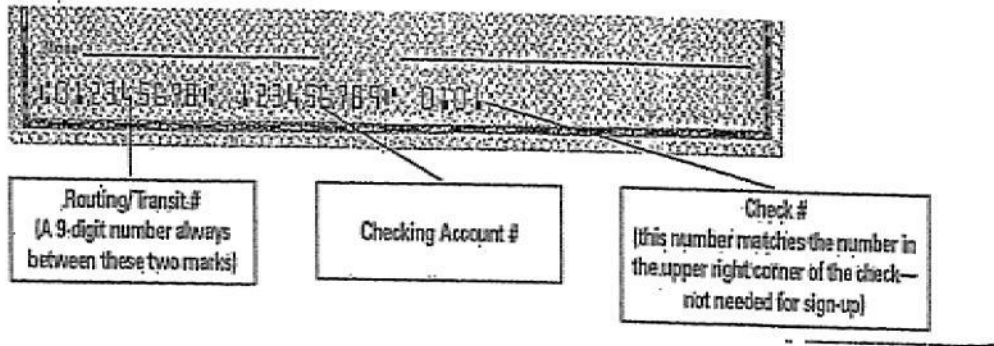


Employee Direct Deposit Enrollment Form

To enroll in Full Service Direct Deposit, simply fill out this form and send it, fax or email to J. Morrissey at 289 Broad Street Windsor, CT 06095, Fax: 860-640-6543 or [email: sueo@jmorrissey.com](mailto:sueo@jmorrissey.com). Attach a voided check for checking account – not a deposit slip. If depositing into a savings account, ask your bank to give you the Routing/Transit Number for your account. It isn't always the same as the number on a savings deposit slip. This will help ensure that you are paid correctly.

Note: We are unable to split your direct deposit, it may only go into one account.

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



Please Cancel Direct Deposit Please change Direct Deposit to my new bank.

A. Bank Name/City/State: _____

B. Bank Routing #: _____

C. Bank Account #: _____

Checking Savings

Your account will be pre-noted for 10 days after input.

IMPORTANT! Please read and sign before completing and submitting.

I hereby authorize my employer J. Morrissey to deposit any amounts owed me by initiating credit entries to my account at the financial institution indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by J. Morrissey to my account. In the event that J. Morrissey deposits funds erroneously into my account; I authorize J. Morrissey, either directly or through its payroll service provider to debit my account for an amount not to exceed the original amount of the erroneous credit. I understand that from the time payroll is input, there could be a seventy-two hour turnaround into my account.

This authorization is to remain in full force and effect until Paylocity and Bank have received written notice from me of its termination in such time and in such manner as to afford J. Morrissey and Bank reasonable opportunity to act on it.

Employee Signature: _____

Printed Name: _____

Date: _____