



Direct Deposit Request Form

FAX BACK TO: (213) 385-0187 or (213) 385-0959

Name _____ SSN _____ - _____ - _____

1). Bank Name _____
Routing # _____ Account# _____

Type of Account: Checking Savings Debit Card
Deposit: Full Check _____ **or** Deposit Specific Amount \$ _____
(Please indicate Amount)

2). Bank Name _____
Routing # _____ Account# _____

Type of Account: Checking Savings Debit Card
Deposit: Full Check _____ **or** Deposit Specific Amount \$ _____
(Please indicate Amount)

Direct deposit will take **3 payroll weeks** to process. The payroll funds may not go into your account until **Friday**. There may be instances when you will receive a manual check instead of direct deposit in cases when your timecard does not make the payroll batch. In the event of a holiday, all direct deposits will be delayed by one business day. Your signature below authorizes Career Strategies to initiate direct deposit of your payroll wages into your account and signifies that you understand and agree with these direct deposit procedures.

Please attach a **copy of a voided check** to initiate direct deposit. To cancel direct deposit, please contact the payroll department at (213) 385-0440.

Signature _____ Date _____

Attach a "VOID" Check

If you elect to Direct deposit into
your Checking Account