## The North Carolina Baptist Hospitals, Incorporated PAYROLL DIRECT DEPOSIT

Check One: START Direct Deposit	STOP Direct Deposit CHANGE Direct Deposit
A VOIDED CHECK OR DEPOSIT SLIP FOR EACH ACCOUNT MUST ACCOMPANY THIS FORM	
Name	Social Security #
Bank Name #1	Routing # (first 8 or 9 #'s to the left of account #)
Bank Name #2	Routing #
Choose Option:  1. Deposit my total NET PAY to my CHECKING ACCT. # (only Bank #1)	(first 8 or 9 #'s to the left of account #)
2. Deposit my total NET PAY to my <b>SAVINGS ACCT. #</b> (only Bank #1	
3. Deposit \$ to Bank # (Checking Acct)	& the balance to Bank # (Savings Acct)
4. Deposit \$ to Bank # (Savings Acct)	& the balance to Bank # (Checking Acct)
5. Deposit \$ to Bank # (Checking Acct)	& the balance to Bank # (Checking Acct)
6. Deposit \$ to Bank # (Savings Acct)	& the balance to Bank # (Savings Acct)
Banks (checking and/or savings accts). An advice form will be issued in 2. You can stop direct deposit at any time simply by completing a copy Resources or Payroll)  3. You will receive a regular check the first pay date after you sign up for the bank to make certain the account is valid.  4. Your net pay will be deposited to your account on Thursday of a Pay 5. If you have questions about the availablity of your funds, you should 6. If you should be underpaid, the money due you will be added to your supervisor is required for a manual check);	of this form checking the "STOP Direct Deposit" box (forms located in Human or direct deposit or change an account. This process permits the Hospital and week. If a bank holiday falls during a payweek; your account will be credited on Friday.
	orize The North Carolina Baptist Hospital, Incorporated to reverse the ry attempt will be made to notify me prior to any reversal being made.***
Signature:	Date: