

EMPLOYEE DIRECT DEPOSIT SIGN UP FORM

The authorization form below gives your employer and your financial institution the authority to deposit your pay to your account(s). Simply complete the form to take advantage of Direct Deposit.

1. Mark the corresponding account type box to indicate whether your pay should be deposited to your checking or savings account.
 2. Fill in your name, name and location of your financial institution, your routing/transit number and account number and the date for each specified account.
 3. If using more than one account for deposit, please use blocks provided for a second account and indicate either the % of pay or dollar amount to be deposited.
 4. If possible, please attach a voided check or a deposit ticket for verification of all financial institution information.
 5. ***Please be sure to sign the form.***
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Employee's Authorization-Please fill out and return to the Payroll Department.

I authorize my employer, _____, WesBanco Bank and the financial institution listed below to initiate electronic entries, and if necessary, debit entries and adjustments for any credit entries which were incompletely funded by my employer or for any credit entries otherwise in error to my account/accounts listed below.

This authority will remain in effect until I cancel it in writing.

1. Checking Savings

Financial Institution

Date

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Routing/Transit Number

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Account Number at Financial Institution

_____ %* or \$ _____ to deposit

*- Your entire paycheck amount must be direct deposited. If choosing a fixed dollar amount for one account, 100% of the balance will be deposited in the other account.

2. Checking Savings

Financial Institution

Date

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Routing/Transit Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Account Number at Financial Institution

_____ %* or \$ _____ to deposit

*- Your entire paycheck amount must be direct deposited. If choosing a fixed dollar amount for one account, 100% of the balance will be deposited in the other account.

Email address: *No paper will be distributed. Your direct deposit slip will be emailed.*

Name (Please Print)

Signature

If any account has a joint account holder, please have them sign below:

Name (Please Print)

Signature

