



**Evergreen
Bookkeeping
Solutions**

Company Direct Deposit Enrollment Form

Client Name _____

Bank Name _____

Account Number _____

Routing Number _____

By signing below, you are signifying you are an authorized signer on the above listed bank account and are authorizing Evergreen Bookkeeping Solutions to initiate authorized direct deposit entries to your employees via the QuickBooks payroll processing system.

SIGNATURE

PRINTED NAME

DATE

****ATTACH A VOIDED CHECK****