

**STEPHENS & COMPANY, INC.**  
**DIRECT DEPOSIT ENROLLMENT/CHANGE REQUEST FORM**

**EMPLOYER:** \_\_\_\_\_

**EMPLOYEE:** \_\_\_\_\_

*This form is to be used for employees who are enrolling in the Direct Deposit service. It may also be used for employees changing the account(s) to which their paycheck is deposited.*

**Complete the Information Below for Direct Deposit**

**I would like my wages/salary to be deposited to the following bank account(s):**

**EMPLOYEE'S BANK:** \_\_\_\_\_

**ACCOUNT NUMBER:** \_\_\_\_\_

**ROUTING NUMBER:** \_\_\_\_\_

**AMOUNT:** \_\_\_\_\_ **SELECT ONE:**  **Checking**  **Savings**

*If you are requesting your entire net pay to be deposited into one account, write "100% Net Pay" in the amount section above AND write "N/A" in the bank section below.*

**EMPLOYEE'S BANK:** \_\_\_\_\_

**ACCOUNT NUMBER:** \_\_\_\_\_

**ROUTING NUMBER:** \_\_\_\_\_

**AMOUNT:** \_\_\_\_\_ **SELECT ONE:**  **Checking**  **Savings**

**REQUIRED DOCUMENTATION FOR EACH ACCOUNT:**

***Voided Check for each checking account (we cannot accept deposit slips)***

***Bank letter or specification sheet for all other accounts (see your bank representative)***

I authorize Stephens & Company, Inc. on behalf of the Employer named above, to make electronic deposits to the specified account(S) noted above. If monies to which I am not entitled are deposited to my account, I authorize the Employer (issuer) to direct the financial institution to return said funds. This authority will remain in effect until I have filed a new authorization, or until this authorization is revoked by me in writing.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Please forward to:** Stephens & Company, Inc., P.O. Box 1177, Leesburg, VA 20177-1177  
703.771.1670 (phone) 703.771.7620 (fax) stepcoinc@aol.com