

Employee Name: \_\_\_\_\_

- Anchor paydays are every Friday (unless otherwise specified in the event of a holiday).
- For all time worked from a calendar Sunday to Saturday (midnight to midnight), pay is issued the following Friday.
- For all regular pay checks mailed, there will be a 10 business day waiting period before a replacement check will be issued for any mail issues.
- Paycom is the company that AHHC utilizes for payroll processing services.

**PAYROLL OPTIONS:**

- **Regular pay check** – a standard bank check is issued and available for pick up in our Glen Carbon office at 8am on Fridays. All checks not picked up by the close of business on Friday will be mailed direct to employee’s home address on record
- **Direct deposit** – you may have your payroll deposited directly into your own personal bank account. You may have all the pay going into a single account or you may choose to split the pay between multiple accounts (i.e. \$50/week into savings, the rest of the payroll into checking)

**DIRECT DEPOSIT ACKNOWLEDGEMENT**

I select direct deposit for disbursement of my pay. I hereby authorize ANCHOR HOME HEALTH CARE/PAYCOM to initiate credit entries for my net pay and my designated financial institution(s) indicated to credit with amounts thereof the accounted indicated. If funds to which I am not entitled are deposited to my account, I authorize debits to my account and return of such funds. This authority is to remain in effect until ANCHOR HOME HEALTH CARE has received notification from me of its termination in such time and such manner as to afford ANCHOR HOME HEALTH CARE a reasonable opportunity to act on it or until ANCHOR HOME HEALTH CARE cancels the agreement.

Bank: \_\_\_\_\_  **Checking**     **Savings**    **NET ACCOUNT**

Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

Bank: \_\_\_\_\_  **Checking**     **Savings**    **Amount: \_\_\_\_\_**

Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

Bank: \_\_\_\_\_  **Checking**     **Savings**    **Amount: \_\_\_\_\_**

Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

**PLEASE ATTACH VOIDED CHECK(S)**

I have read the appropriate acknowledgement and am aware of Anchor’s payroll practices. Additionally, I am aware that Anchor has direct deposit/pay card statements available online and agree to utilize this service to review my payroll details.

I choose  **Regular Pay Check**     **Direct Deposit** for my payroll.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date