



Payroll Services
755 Crossover Lane, AW-B1
Memphis, TN 38117
901-374-5000

APPLICATION FOR DIRECT DEPOSIT

This form must accompany the original voided check for checking requests and documentation from your bank indicating the routing/transit # and account number for a savings request. Deposit Slips are not acceptable.

"Please ensure the account holder name is pre-printed or written on your cancelled check."

Payroll Specialist Name: Nancy Toney

Application Date: _____

Property Name: Roosevelt Hotel New Orleans

Pay Group/Location #: ROO/1721

Team Member Name: _____

Employee Id Number: _____

Acct. # 1
_____ New account
_____ Change account
_____ Cancel account

Checking
Savings

Bank Name: _____

\$ _____

Partial
Balance
100%

Street Address: _____

City, State, Zip: _____

Phone Number: _____

9 digit Routing/Transit # _____

Account # _____

Acct. # 2
_____ New account
_____ Change current account
_____ Cancel current account

Checking
Savings

Bank Name: _____

\$ _____

Partial
Balance
100%

Street Address: _____

City, State, Zip: _____

Phone Number: _____

9 digit Routing/Transit # _____

Account # _____

Hilton Hotels Corporation will make every effort to deliver your earnings to your bank by midnight the day before payday. The Hilton Hotels Corporation is not responsible for the time of day your bank deposits your earnings into your account. Check with your bank for their posting times.

Requests for direct deposits or changes to existing direct deposits will take up to 3 pay cycles to prenote before the direct deposit becomes active.

I hereby authorize Hilton Hotels Corporation to deposit my earnings into the account(s) stated above and to withdraw any amounts not due me that were deposited in error. I understand that it is my responsibility to check each payroll check for deposit information and accuracy.

Team Member Signature

Date

Incomplete Applications will be returned.

REVISED 05/07

*** ATTACH VOID CHECK HERE

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