



employer solutions staffing group

Leveraging Resources in a Changing Market

Direct Deposit/Payroll Debit Card Authorization

Employees have the option of receiving wages by Direct Deposit and/or Payroll Debit Card.
If you do not provide a written election, wages will be paid by Payroll Debit Card.

SECTION 1 BASIC INFORMATION

Employee Name <i>John Hernandez</i>	SSN# (last 4 digits) <i>4993</i>	Effective Date
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SECTION 2 PAYROLL ELECTION

Direct Deposit (Please complete Sections 3 and 5 below)
 Payroll Debit Card (Please complete Sections 4 and 5 below)

SECTION 3 DIRECT DEPOSIT

ACCOUNT	<input type="checkbox"/> Update Bank Account	<p>I understand and acknowledge that if I do not provide a voided check with this direct deposit form, I am responsible for any delays in payroll or extra costs incurred if the account number that I provide is incorrect.</p> <p>Initial <u><i>JH</i></u> Date <u><i>11/11/14</i></u></p>
	Bank Name: <i>Key Bank</i>	
	Routing# <i>307070267</i>	
	Account# <i>760112072490</i>	
	Account Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other _____	

- To help us avoid making an error, please attach a copy of a voided check. **(a deposit slip will not work)**
- If you change banks, do not close your old bank account until your direct deposit has started at the new bank, which may take 2 pay periods.

SECTION 4 PAYROLL DEBIT CARD (GLOBAL CASH CARD)

Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. In order to request a Payroll Debit Card for you, we must provide all of the following information that will enable the financial institution to identify you. If you do not submit a Direct Deposit/Payroll Debit Card Authorization, ESSG will provide the necessary information and issue you a Payroll Debit Card to pay your wages. For your protection, the financial institution may ask you to provide them additional identification information so they can verify your identity.

Except for the routing and account number, ESSG does not have access to any information regarding your Payroll Debit Card account or transactions. On your first payday, you will receive your new Payroll Debit Card, and a packet containing all of the terms and conditions. You will then sign acknowledging that you received the Payroll Debit Card and packet. Your Payroll Debit Card will be reloaded on each payday you receive wages.

CARDHOLDER INFORMATION (as you want your Payroll Debit Card to be issued)

First Name	M.I.	Last Name	Date of Birth
Street Address (PO BOX NOT ACCEPTABLE)			Social Security#
City	State	Zip	Cell Phone (mobile)

GET TEXT ALERTS, when your paycheck is deposited on your card!
 All we need to know your cell phone service provider and mobile number above!

Yes, sign me up, for text alerts
 My mobile service provider is: _____

RECEIPT OF PAYROLL DEBIT CARD (to be completed when you pick up your Payroll Debit Card)

Payroll Debit Card Routing # 12242597	Payroll Debit Card Account # _____
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I have received my Payroll Debit Card, welcome brochure, program fees, program terms, conditions, and disclosures. By activating my Payroll Debit Card, I am agreeing to the program terms, conditions, and disclosures that are included or made available to me from time to time from the financial institution. I authorize the financial institution to debit my Payroll Debit Card account for the fees described in the fee schedule that is part of the program terms, conditions, and disclosures.

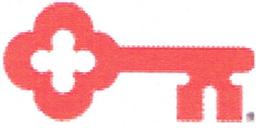
Employee's Signature: _____ Date: _____

SECTION 5 AUTHORIZATION

I authorize ESSG to directly deposit my periodic wages/compensation payments, net of required tax withholdings, other required withholdings or authorized deductions, into my account(s) as designated above and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to my account(s). *** E-mail is required for pay stub information.**

*E-mail: *jerry.hernandez.8093 @ yahoo.com*
 this information will only be used to send your paystubs electronically

Employee's Signature: _____ Date: *11/11/14*



Direct Deposit Sign-Up Form

Complete this form to request direct deposit into your KeyBank checking or savings account.

3 Easy Steps!

- 1 Fill-in this form online or print it off and fill it out.
- 2 Attach a voided check to this form to confirm your account and routing numbers.
- 3 Submit this completed form and a voided check to the appropriate department:

Payroll Deposits:
Forward this form to your employer's payroll department.

Retirement/Annuity, Dividend and Other Deposits:
Follow up with your current provider to determine where to forward this document.

Personal Information:

John G. Hernandez
 First Name Middle Initial Last Name

604-74-4993
 Social Security Number

4211 E 100th Ave Lot 320
 Address

Thornton CO 80229
 City State Zip Code

(720) 434-6038
 Phone Number

N/A
 Alternative Phone Number

Type of Deposit:

Payroll Retirement/Annuity Dividend

Other: _____ (non SSA/SSI*)

Account you would like your check automatically deposited into:

760112072490
 KeyBank Account Number

Select one: Checking Savings

307070267
 KeyBank Routing Number

John Hernandez
 Name on the Account

I authorize (name of the company) Employer Solutions Staffing group and KeyBank to automatically deposit my check into my account listed above. This authorization will remain in effect until I have filed a new authorization, or until this authorization is revoked by me in writing.

Customer Signature _____ Date 11/24/14

* If you would like to have your government checks deposited into your KeyBank account please go to www.key.com/directdeposit and fill-in online or print a copy of the Government Direct Deposit signup form.