



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: Joseph Stewart SSN# (last 4 digits): _____ Effective Date: 7/8/15

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

Update Bank Account

Bank Name: Heartland

Routing#: 296075535

Account#: 90270034

Account Type: Checking Savings Other

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.

Initial: JRS Date: 7/8/15

To help us avoid making an error, please attach a copy of a voided check. (a deposit slip will not work)

... banks do not close your old bank account until your direct deposit has started at the new bank, which may take 2 pay periods.

Direct Deposit Authorization

Please provide to your employer

I authorize my employer to deposit my pay automatically each payday to my Heartland Credit Union account. This authority will remain in effect until I have cancelled it in writing.

Your Name: Joseph Stewart Your Signature: [Signature]

Deposit to: Please choose the account you would like the deposit made and list the account number below

Checking Acct. #: 90270034 Savings Acct. #: _____

Payroll Department Use:

Routing/Transit Number: 296075535



If you have any questions please contact Heartland at (651) 451-5160 or (800) 813-9185.

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authorize the financial institution to ... conditions, and disclosures.

Employee's Signature: [Signature] Date: 7/8/15

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: Joe 6321 @comcast
this information will only be used to send your paystubs electronically

Employee's Signature: [Signature] Date: 7/8/15