

Direct Deposit Authorization

Direct Deposit Disclaimer:

If you are eligible for and choose to enroll in Direct Deposit, we recommend that you verify with your bank or financial institution when your funds would be posted to your account and made available to you. Each bank and financial institution has its own process for funds availability.

TO ENROLL IN DIRECT DEPOSIT, COMPLETE THIS FORM, ATTACH A VOIDED CHECK OR BANK DIRECT DEPOSIT AUTHORIZATION FORM AND FAX IT TO 1-866-313-4798

PLEASE INDICATE THE AFFILIATED COMPANY YOU ARE WORKING FOR BY CHECKING A BOX BELOW:



Account 1

Employee Name*: _____ **Last Four of SS#: xxx-xx-** _____

Bank: _____

Bank Transit No.: _____

Account No.: _____

Amount: _____

Savings Checking

Account 2

Employee Name*: _____ **Last Four of SS#: xxx-xx-** _____

Bank: _____

Bank Transit No.: _____

Account No.: _____

Amount: _____

Savings Checking

***Employee must be listed as a named account holder.**

I hereby authorize and request BANK W Staffing and its affiliated companies KBW Financial Staffing & Recruiting, The Nagler Group, Alexander Technology Group, or Sales Search Partners, hereinafter called COMPANY, to make payment of any amounts owing to me for payroll by initiating credit entries to my account(s) indicated above in the bank name(s) above, hereinafter called BANK. In addition, I also authorize and request COMPANY to initiate debit entries to my account(s) indicated above in the bank(s) named above in the following circumstances and under the following conditions:

1. The debit entry is initiated for the purpose of correcting an erroneous credit previously initiated to my account;
2. The correcting entry is transmitted in such time as to be delivered or made available to the BANK by midnight of the fifth day following settlement of the erroneous entry;
3. Prior to the time the correcting entry is initiated, the COMPANY has sent or delivered to me written notification of such correction and the reason therefor.

I authorize and request BANK to accept any credit or correcting debit entries initiated by COMPANY to such account and to credit or debit the same to such account without responsibility for the correctness thereof:

It is understood that this agreement may be terminated by me at any time by written notification to COMPANY or BANK. Any such notification to COMPANY shall be effective only with respect to entries initiated by COMPANY after receipt of such notification and reasonable opportunity to act on it. Any such notification to BANK shall be effective only with respect to entries credited or debited to my account by BANK after receipt of notification and a reasonable time to act on it.

Name: _____ **Signature:** _____ **Date:** _____