Payroll Payment Request

Employee Information

Employee Name:		Employee ID:	Location Number:	
Street Address I:		Street Address 2 (P.O. Box):		
City:	State:	Zip:		
□ Paycard	Paycard Information:			

aycard Information:

or 🗌 All Account Number: Deposit Amount: _____

By providing the information requested above and signing below, I hereby elect and consent to receive my wages, including but not limited to off cycle wage payments and wage payments upon discharge, by electronic transfer of wages to a paycard. In addition, to the extent permitted by applicable law, I hereby authorize Bane Staffing to make all of my deposits and deposit adjustments, including those involving off cycle wage payments and wage payments upon discharge, to my paycard, and I authorize the bank where such funds are deposited to accept such deposits and make such adjustments. I acknowledge I have received a copy of the terms, conditions, and fees associated with using such paycard. This authorization shall remain in effect until fourteen (14) days after Bane Staffing receives written notice from me terminating my authorization.

Direct Deposit	Bank Account Information	
Account Type: 🗌 Checkin	ng 🔲 Savings	
ABA/Routing #: Bank Name:	Account #: Deposit Amount:	or All
Bank Account Informa Account	tion - Account 2: Type: □ Checking □ Savings	
ABA/Routing #:	Account #:	
Bank Name: Additional Information for Dir	· · · ·	or [] All
 It is your responsibility to notify Payrol For each account, you must prov 	deposited into your account(s) within 2 pay periods. Il of any changes to/closure of your bank account. Failure to vide a voided check drawn from the account (no o BA and account #. Incomplete or inaccurate inform	deposit slips) or a letter from the bank on

By providing the information requested above and signing below, I hereby elect and consent to receive my wages via direct deposit. In addition, I hereby authorize Bane Staffing on its own behalf and on behalf of its direct and indirect subsidiaries and affiliates to make (electronically or otherwise) all deposits and deposit adjustments involving my pay, including those involving off cycle pay and pay upon discharge, to the account(s) identified above, and I authorize the bank(s) listed above to accept such deposits and make such adjustments. I also authorize Bane Staffing, at its election, to pay any off cycle wage payments and wage payments due to me upon discharge by means of electronic transfer of funds to a paycard, and I acknowledge that a copy of the terms, conditions, and fees associated with using such paycard are available at my workplace and upon request made to my manager. These authorizations will remain in effect until Bane Staffing receives written notice from me terminating my authorization.

Electronic Paystubs. I hereby elect and consent to receive my paystubs electronically over the Internet. In addition, I may access the electronic paystubs by phone, email, fax, abbreviated text message, or by calling customer service directly at Global Cash Card.

Electronic W-2's. I hereby elect and consent to receive my W-2's electronically over the Internet. At any point in time I decide to receive a paper copy of my W-2 form instead, I will notify Bane Staffing in writing of such request.

Employee Name (Print Name): ______ Date: _____ Date: _____

Employee Signature Authorizing Payment Method: