

								PAY OPTION AUTHORIZA	TION F	ORM		
EMPLOYEE'S NAME:									SSN:			
I wou □ Dir			-		•	ayC	ard		Choose One			
Please complete the portion below for each selection that you make												
	DIRECT DEPOSIT											
	w Dire	ct De	eposit infor	mati		elov	v co	Change in bank, new account or routin ompletely in order to have the net amound voided personal check taped to pa	int of your	paycheck d		
Name of Bank, Credit Union, etc:						tc: _				Phone #:		
Address: City:								City:	State: Zip:			
1	Bank Routing Number (must be 9 digits)					Account Number (must attach blank voided check)		st be ALL)	Type (C= Checking - S = Savings)			
2				-								

***************** tape here ***************

Direct Deposit is a benefit provided by Global Technical Services (hereinafter called COMPANY) and by signing below you have voluntarily chosen to receive your wages by direct deposit instead of receiving a COMPANY-generated paycheck on payday. Your paycheck should be deposited and available on each Friday. Due to the nature of the electronic funds transfer process, you may incur delays receiving the funds in certain situations, including but not limited to bank or legal holidays, acts of God, electronic failures and COMPANY or bank errors. You are responsible for contacting your bank to verify that funds were deposited in your account prior to using them. The Direct Deposit payment does however have a one-week delay in processing, which will produce a live paper check for your first payment in which Global will take great care in making sure you receive.

I hereby authorize COMPANY to deposit my net pay in the account as indicated above. Also, in the event there is an overpayment, I authorize COMPANY to either directly withdraw funds from the above bank account or directly withhold any monies from future deposits. Where a payment has been deposited to me in error, I will remit to COMPANY all monies paid by check or money order. I also authorize COMPANY to contact the bank to verify any of the above information. I understand that COMPANY will not be responsible for any overdrafts on my account. I hereby release COMPANY from any liability associated with the availability of funds including but not limited to bank fees, penalties, interest charges or other costs. You may elect to have a Direct Deposit and a Paycard.

I authorize the selection made above and agre	e to all terms associated with this selection.
Employee's Signature	Date Signed



	COMDATA PAYCAF	RD CONSENT FORI	V			
EMPLOYEE'S NAME:	SSN	:				
I am applying for: ☐ New PayCard #	☐ Reactivation of PayCard #	PayCard				
	deposited	ndicate the dollar amount the	may elect to have "ALL"			
I would like my Permanent PayCard to be	•	of your earnings credited to your PayCard or a select am				
☐ Home address (listed below)		UNT: \$				
☐ Alternate Address (listed below)	PHONE	#				
ADDRESS:***Your Acti	CITY:	STATE: _	ZIP:			
called COMPANY) and by signing below receiving a COMPANY-generated paychech the electronic funds transfer process, you make or legal holidays, acts of God, electro to verify that funds were deposited in your a linear through the transfer process. It hereby authorize COMPANY to deposit mauthorize COMPANY to either directly with deposits. Where a payment has been deposialso authorize COMPANY to contact Compessor processes also authorize to make the compessor of the cards and in the COMPANY from any liability associated with You may elect to have a Paycard and a Disservice charge of \$1.00. A \$26.00 service of the beassessed after the fifth advance per assign By signing below, I consent to receive my wand agree to the fee schedule that is located to	k on payday. Your PayCard funds we hay incur delays receiving the fundament failures and COMPANY or bar account prior to using them. The pay in the account as indicated and as from the above Paycard ted to me in error, I will remit to Codata to verify any of the above in the event that my card is lost or sto with the availability of funds including rect Deposit. Advance Policy: The harge will be assessed after the third ament.	will be available on each Fids in certain situations, in the errors. You are responsed above. Also, in the ever daccount or directly with DMPANY all monies paid formation. I understand then, I will contact Comdarg but not limited to bank for first and second advance advance per assignment.	riday. Due to the nature of including but not limited to sible for contacting Comdata int there is an overpayment, I hold any monies from future by check or money order. I hat COMPANY will not be ta directly. I hereby release tees, penalties, or other costs. per assignment does have a A \$51.00 service charge will owledge, I also understand			
Employee's Signature	Date Signed	Date of Birth				

For Payroll Purposes ONLY: Cardholder Ref#