

GES Direct Deposit of Payroll Authorization

Employee Name: _____

Mailing Address: _____ SS#: _____

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDITS)

I authorize my employer GES to electronically deposit a fixed amount or the full/remaining net pay amount into the account or accounts listed below every payday. I understand that if I want 100% of my net pay to be deposited to one account, I will provide the requested account information and check the "Total Net Pay or Remaining Balance" box. I also understand that if I elect to have a fixed amount deposited into one or more accounts and the remaining balance to be deposited into another account, I will provide the requested account information and "Fixed Amount Per Pay" for each designated account, and for the account I elect to have the remaining net pay deposited, I will provide the requested account information and check the "Total Net Pay or Remaining Balance" box for that account.

<input type="checkbox"/> New/Add <input type="checkbox"/> Change <input type="checkbox"/> Cancel			
1. Financial Institution Name:		Branch	
Routing #	Account #	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Fixed Amount Per Pay: \$		<input type="checkbox"/> Total Net Pay or Remaining Balance (No Dollar Amount Needed)	

<input type="checkbox"/> New/Add <input type="checkbox"/> Change <input type="checkbox"/> Cancel			
2. Financial Institution Name:		Branch	
Routing #	Account #	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Fixed Amount Per Pay: \$		<input type="checkbox"/> Total Net Pay or Remaining Balance (No Dollar Amount Needed)	

<input type="checkbox"/> New/Add <input type="checkbox"/> Change <input type="checkbox"/> Cancel			
3. Financial Institution Name:		Branch	
Routing #	Account #	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Fixed Amount Per Pay: \$		<input type="checkbox"/> Total Net Pay or Remaining Balance (No Dollar Amount Needed)	

If monies to which I am not entitled are deposited to my account, I authorize the GES Payroll Department to direct the financial institution to return said funds. This authority will remain in effect until I have filed a new authorization, or until revoked by me in writing, or upon my termination of employment with my employer.

As required by the Federal Office of Foreign Asset Control in Support of U.S.C. Title 50 War and Defense, I attest that the full amount of my direct deposit is not being forwarded to a bank in another country and that if at any point I establish a standing order to have my bank forward the full direct deposit to a bank in another country, I will inform the GES Payroll Department immediately at UnionPayrollSupport@ges.com.

Notes:

- If you would like to distribute monies to more than three accounts, please complete another form.
- Please note the set-up process for direct deposit to actually occur may take at least 2 pay cycles from the date of submission of the form to payroll. During the set-up process or when a change is made, a live check will be generated and sent to your office location.
- Completed forms **along with a voided check or printed document from the bank (even for savings accounts)** should be e-mailed to UnionPayrollSupport@ges.com.

Employee Signature: _____

Date: _____