

## **Wage Payment Method Authorization**

Employees have the option of receiving wages by Check, and/or Direct Deposit. If you do not provide a written election, wages will be paid by Check

CTION I BASIC INFORMATION			
ployee Name	SSN# (last 4 digits)	Effective Date	
CTION 2 PAYROLL ELECTION			
<b>Direct Deposit</b> (Please complete Sections 3 and 4 below)			
Paper Check (Please complete Section 4 below)			
CTION 3 DIRECT DEPOSIT			
☐ Update Bank Account	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		
Bank Name:			
Routing#	incurred if the account num	incurred if the account number that I provide is incorrect.	
Account#	Initial	Date	
Account Type: Checking Savings Other			
<ul> <li>To help us avoid making an error, please attach a copy of a voided check. (a deposit slip will not work)</li> <li>If you change banks, do not close your old bank account until your direct deposit has started at the new bank, which may take 2 pay periods.</li> </ul>			
SECTION 4 AUTHORIZATION			
I authorize ESSG to make my periodic wage/compensation payments in the manner set forth in Section 2.			
Employee's Signature:	Dat	e:	
	CTION 2 PAYROLL ELECTION  Direct Deposit (Please complete Sections 3 and 4 below)  Paper Check (Please complete Section 4 below)  CTION 3 DIRECT DEPOSIT  Update Bank Account  Bank Name:  Routing#  Account#  Account Type: Checking Savings Other  To help us avoid making an error, please attach a copy of a voided checking you change banks, do not close your old bank account until your direct of the complete CTION 4 AUTHORIZATION  Authorize ESSG to make my periodic wage/compensation	SSN# (last 4 digits)	