



**ELECTRONIC PAY
AUTHORIZATION FORM**

EMPLOYEE INFORMATION SECTION (* These are required fields to enroll in direct deposit)

*Employee Name	
*Client Name PERSONNEL ASSOCIATES INC., FIRST STAFFING	*Social Security Number
*Date of Birth	*Primary Phone Number (with area code)
*Address	*City
*State	*Zip Code
E-Mail Address	Employee System ID (Trion Solutions Use Only)

<p>Check one:</p> <p><input type="checkbox"/> Add my bank account(s) Employees may choose to deposit amounts in up to four different accounts below.</p> <p><input type="checkbox"/> Change my bank account(s) Please allow 2 pay periods for processing changes.</p> <p><input type="checkbox"/> Cancel all account(s) This will cancel all electronic deposits and a paper check will be issued. Allow 48 hours for cancellations.</p> <p><input type="checkbox"/> Issue me a Brinks Skylight Pay-card Everyone is eligible.</p>	<p>By signing below, I authorize Trion Solutions, Inc. and the financial institution(s) listed below to deposit my paycheck automatically and when necessary, to facilitate debit entries for funds erroneously deposited. I also understand that my request(s) related to direct deposit may take two to three pay periods to activate. This authorization supersedes any previous payroll deduction distribution form and will remain in effect until I can cancel in writing. I understand that all direct deposits are made through the Automated Clearing House (ACH), that the funds' availability is subject to the term and limitations of the ACH as well as my financial institution, and that the ACH process can take 48 hours to complete, excluding weekends and holidays. If electing the Pay-card option, a Welcome Kit will be sent to me detailing all of the benefits, terms and conditions. There is no approval or application process.</p>
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	*Nine Digit Routing Number	*Account Number	*Type of Account Checking or Savings	*Example: \$100.00 or 100%
1				<input type="checkbox"/> Amount <input type="checkbox"/> Percentage
2				<input type="checkbox"/> Amount <input type="checkbox"/> Percentage
3				<input type="checkbox"/> Amount <input type="checkbox"/> Percentage
4				<input type="checkbox"/> Amount <input type="checkbox"/> Percentage

Pay-Card				
	*Nine Digit Routing Number	*Account Number	*Check	*Example: \$100.00 or 100%
1	264171241		<input type="checkbox"/> Checking	<input type="checkbox"/> Amount <input type="checkbox"/> Percentage

Attach a copy of a VOID check, or a letter from your financial institution confirming the account and routing numbers to process a Direct Deposit.

Signature

Date