



Employee Direct Deposit

To request Direct Deposit of your paycheck, read and complete the following authorization agreement, and give it to your payroll department. If you are eligible to participate, they'll set you up on Direct Deposit.

Please deposit my entire net pay into the account specified below.

Circle One: **Checking** **Savings**

Bank Name: _____

Account #: _____

Routing / Transit #: _____

Attach a void check, bank letter, or specification sheet. Deposit tickets are NOT accepted.

If you are splitting your deposit, please select the second account and mark the percentage or the correct dollar amount to be deposited

Circle One: **Checking** **Savings**

Bank Name: _____

Account #: _____

Routing / Transit #: _____

Attach a void check, bank letter, or specification sheet. Deposit tickets are NOT accepted.

Split amount	Percentage to this account	% Or flat dollar amount	\$

EMPLOYEE INFORMATION

Name: _____

Social Security #: _____
(REQUIRED)

Home Address: _____

City: _____

State: _____ **Zip:** _____

Responsibility of Employees

Upon enrolling in the direct deposit program, the Employee will affirm whether the entire payment amount, is or is not, subject to being forwarded to a bank in another country. Should the Employee's IAT status change at any time in the future, the Employee should notify the State or the inquiring agency.

Should the Employee receive payroll via direct deposit at a U.S. financial institution and then have the entire payroll amount forwarded to a bank in another country, the Employee should advise **client name**. **client name** may provide a general notice regarding the IAT rules, or it may make a specific inquiry of you. If the Employee does not advise **client name** that the Employee meets the definition of an IAT payee, the Employee will be presumed to be a non-IAT payee. Should the Employee's IAT status change at any time in the future, the Employee should notify **client name**.

Please indicate if the Employee is an IAT payee by placing a check here: []

AUTHORIZATION

I authorize my employer: **The Odyssey Group** (hereinafter **The Odyssey Group**) to deposit my net pay each payday directly into my account. In the event that **The Odyssey Group** deposits funds erroneously into my account, I hereby authorize **The Odyssey Group** to debit my account for an amount not to exceed the original amount of erroneous credit.

Any dispute arising out of or in correction with this agreement, if not otherwise resolved, shall be determined by arbitration in Cleveland, Ohio, in accordance with the Rules of the American Arbitration Association, and it's the expressed desire of both parties that the prevailing party be awarded the costs and attorney's fees and that the award be entered as a judgment in any jurisdiction in which the non-prevailing party does business.

This authorization will remain in full force and effect until **The Odyssey Group** and the Bank have received written notice from me of its termination in such time and in such manner as to afford **The Odyssey Group** and Bank a reasonable opportunity to act on it.

Employee Signature: _____ **Date:** _____