



### AUTHORIZATION FOR DIRECT DEPOSIT U.S. LOCATIONS

*Attach a voided check for checking or a deposit slip for savings. Number the check or deposit slip to correspond to the account number above. Send this form, along with attached voided check and/or a deposit slip to Barb Stoltenberg - ESI Payroll A420.*

Name: \_\_\_\_\_ Location: GAR

SSN: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Check the pay frequency that applies:      Weekly       Semi-Monthly   
Please use this information for:       Payroll       Expense Reimbursements       Both

Account #1 Checking  or Savings  Amount \$ \_\_\_\_\_ or Percent % \_\_\_\_\_  
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Check here if you agree to access your pay statements online via E-Payroll instead of receiving a manual pay statement. This can be reversed at any time by contacting Payroll.

#### Information About Your Direct Deposit

- Allow one pay cycle after payroll has received your enrollment for the direct deposit request to be activated. Your account will be "prenoted" for one pay period. The prenote process is a "dry run" to detect any problems with your bank transit and account numbers. If the prenote process detects no problem, your net pay for the next pay period will be electronically transferred to your account. Instead of receiving a paycheck, you will receive a pay advice that reports the same information that would have appeared on your paycheck stub.
- If you change banks or open a new account you will need to complete a new authorization form and submit it to Payroll. Direct deposit transactions made to your "old" account will continue until the "new" account becomes effective.
- Notify Payroll in writing if you want to cancel your direct deposit.

*I authorize Yellow Roadway Corporation or any of its affiliated companies, to make deposits of my pay and to make any necessary adjustments for incorrect deposits in the account (s) indicated below. I authorize my selected financial institution to accept such deposits and make necessary adjustments. It is agreed that these deposits may be made electronically and under the rules of the Mid-America Payment Exchange.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Complete this form and print a copy. Forward with the required documents to Payroll, Attn: Barb Stoltenberg - Mail Stop A420.

Or, mail directly to:  
Barb Stoltenberg  
PO Box 7270 MS A420  
Overland Park, KS 66207