

OCO, Inc.
Direct Deposit Election Form

Payroll Check

Direct Deposit: I hereby authorize OCO, Inc. to deposit my paycheck into the account designated below. I understand this entry is made through the Automated Clearing House to my bank or credit union account designated. Furthermore, in the event that a credit entry is made to my account in error, I authorize OCO, Inc. to make a correcting entry.

Designation of Check Stub Distribution:

- Hold my check stub at the main office for pick-up.
- Mail my check stub to my regular mailing address.

Regular Pay Check: I do not wish to authorize direct deposit, and I hereby request a regular printed paycheck. I understand that checks are mailed on the night prior to the scheduled payday. Once it is mailed, OCO, Inc. cannot guarantee the paycheck will be received on the actual scheduled payday.

Designation of Pay Check Distribution:

- Hold my paycheck at the main office for pick-up according to the payroll schedule.
- Mail my paycheck to my regular mailing address.

Mileage/Reimbursement Check

Direct Deposit: I hereby authorize OCO, Inc. to deposit my mileage/expense reimbursement into the account designated below. I understand this entry is made through the Automated Clearing House to my bank or credit union account designated. Furthermore, in the event that a credit entry is made to my account in error, I authorize OCO, Inc. to make a correcting entry.

Regular Mileage/Expense Reimbursement Check: I do not wish to authorize direct deposit, and I hereby request a regular printed mileage/reimbursement check. I understand that mileage/reimbursement checks are mailed on the day of the scheduled reimbursement. Once it is mailed, OCO, Inc. cannot guarantee a receipt date.

Distribution:

Mileage/Reimbursement checks and stubs for direct deposit elections will be mailed from the main office to the employee's regular mailing address on the date of the scheduled reimbursement. Pick up is not an available option.

Bank Information

Note: Use a separate form if funds are deposited into more than one bank, or if payroll and mileage/reimbursement checks into are deposited numerous deposit account.

Banking Institution: _____ Bank/Credit Union ABA #: _____

Checking Account #: _____ Amount: \$ _____

Savings Account #: _____ Amount: \$ _____

I understand that my checks will not be direct deposited until a test ("pre-note") has been done on my account to verify the accuracy of the information provided.

Employee's Signature

Print Name

Date