



TEAM MEMBER DIRECT DEPOSIT

GUIDELINES - DEPOSIT TO BANK ACCOUNT

- To take advantage of direct deposit, the team member must complete and sign the enrollment form below. A separate enrollment form must be completed for each deposit account into which the team member wishes to direct funds. The team member must provide his or her Operator with a voided check for each bank account(s) along with the signed enrollment form(s).
- Once enrolled, the team member will continue receiving his or her net pay by check until the team member's bank completes the pre-notification process of verifying the team member's bank account number and bank routing number.

PAYROLL DIRECT DEPOSIT ENROLLMENT AUTHORIZATION

Name _____ Date _____

I hereby authorize **Jim Bryant** JWB Hospitality LLC Chick-fil-A at **Pleasant Grove Road & Whitaker Parkway** to provide for direct deposit of any wages or compensation due me, less any mandatory or authorized withholding or deductions, in the below designated account(s).

- Team members employed by franchised Operators:** If at any time the amount of wages or compensation so deposited exceeds the amount of wages actually due and payable to me, I authorize my franchised Operator-employer, or Chick-fil-A, Inc. as payroll processor for my franchised Operator-employer, to withhold a sum equal to the overpayment from my future wages or recover such overpayment from the below designated account(s).
- Team members employed by Chick-fil-A, Inc.:** If I am employed at a Chick-fil-A, Inc. Company-operated location, then at any time the amount of wages or compensation so deposited exceeds the amount of wages or compensation actually due and payable to me, then I authorize Chick-fil-A, Inc. as my employer to withhold a sum equal to the overpayment from my future wages or compensation or recover such overpayment from the below designated account(s).

If any action taken by me results in non-acceptance of a direct deposit by the designated financial institution(s), I understand that neither my franchised Operator-employer (if applicable) nor Chick-fil-A, Inc. assume responsibility for processing a supplemental salary or wage payment until the amount of the non-acceptance deposit is returned by the financial institution.

Accounts:

Type of Account (Checking or Savings)	Account Number	Routing Number (9 digit number)	Name of Financial Institution	Amount to Deposit (Entire check, specific dollar amount, or percentage of check)

_____ I would like my deposit advice emailed to me at the following email address:

Please attach a voided check for each checking account.

Your Direct Deposit will continue to be deposited into your designated account(s) until Chick-fil-A, Inc. is notified by you or your franchised Operator-employer that you wish to re-designate your account(s). **Please do not close an account listed above without you or your franchised Operator-employer giving the Payroll Processing Department at Chick-fil-A, Inc. at least two weeks prior written notice and providing the necessary alternative deposit instructions.**

Team Member Signature

Date