

TRENDSETTER'S W@H CUSTOMER CARE, LLC

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Payroll Processing Agreement

I	hereby authorize Trendsetter's W@H Customer Care, LLC to mail/direct deposit to				
for any delay of my financ receives writ	y or loss of funds due to incorrect or ial institution in depositing funds to	titution indicated below. I agree not to he r incomplete information supplied by me o my account. This agreement will remain m me, my financial institution, or until I soll processing options:	or by my financial institution, or due n in effect until Trendsetter's W@ F	to an error on the part I Customer Care	
Option 1:					
	I wish to receive my payroll by $\underline{\Gamma}$	Direct Deposit to myName of Finance	Checking Account		
	Routing Number:	Name of Finance			
	Account Number:				
	I wish to receive my payroll by F Routing Number:	Direct Deposit to myName of Finance	Savings Accouncial Institution	ıt	
Option 2:					
	I wish to have my payroll mailed	to the following address:			
	Street Address:			_	
	City:	State:	Zip:	_	
	proper verification/authorization	l send to your email a request to verify th on file. You are responsible for ensuring r payroll sent to addresses that have not b	that the address is correct. Trendset		
Option 3:					
	\$10.00 will be deducted from my	to a Bank of America CashPay Prepai initial paycheck and will be deducted ev two (2) weeks to receive my debit card an	ery year on the anniversary date of th	is selection. I also	
Email Addre	ess:	SSN:	DOB:	_/	
Signature R	equired:				
			Date	::	
Agent Printed Name		Agent Signature:		Today's Date	

Please include a copy of your valid, unexpired government issued ID, such as Driver's License or State ID and a copy of your Social Security Card. Please email or mail to the address listed above.

This form can be signed electronically or mailed/emailed with supporting documentation.