

Payroll Redirection

Check One: Long Term Short Term

Start Date:

End Date:

I, _____ agree to have Human Capital and/or affiliated companies deduct _____ hours/dollars out of my paycheck per pay period for _____ pay periods, or until deductions are paid in full for a combined salary of _____. Such salary redirection shall cease on _____. I also understand that in the event that I am terminated and/or voluntarily leave the company, that the entire amount owing will be deducted from my final paycheck. Furthermore, in the event that the amount owing on my final paycheck exceeds the amount owed for hours worked, that I will be personally liable for any difference. Please indicate the reason below for the salary re-direction:

- Uniforms Cell Phone Advances Keys
 Other: _____ Other: _____

I understand that I am waiving my right to sign a new redirection form for each payroll date of redirection. However, in lieu of such a form. This form shall be sufficient for the multiple redirection. I also agree that this consent shall bar any action, at law or equity, against Human Capital or _____ regarding multiple payroll deductions.

Employee Signature: _____ Witness Signature: _____

Employee (Please Print): _____ Witness (Please Print): _____

Date: _____ Date: _____

On-Site Employer Signature: _____

Payroll Use Only

Date Received Payroll:

Payroll Signature:

Please return completed form via email or fax to payroll@human-capital.com or 248.281.5102.