

Authorization Agreement for Direct Deposit

Originating Company Name: _____

Branch/Division: _____

I authorize the above named Originating Company to initiate entries to the account indicated below as follows:

- 1 They may initiate CREDIT entries, which moves money into my account according to the schedule and the other conditions to which the Originating Company and I have agreed.
- 2 They may initiate DEBT entries to reverse any transactions they have originated to my account in error.

Name: _____ SSN: _____
(Please Print)

Account number: _____

Name of Depository Financial Institution: _____

Location of Depository Financial Institution: _____

City: _____ State _____ Zip: _____

Please enter your bank's routing and transit number here, or staple a VOIDED CHECK below.*

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 (nine digits)

This authority is to remain in effect until the Originator has received written notification of its termination and has had a reasonable opportunity to act upon it.

Signed: _____

Date: _____

***DO NOT USE A DEPOSIT SLIP.** Many banks print internal transaction codes instead of their routing and transit numbers on their deposit slips. Using an invalid routing and transit number will prevent your transaction from being directed to the correct bank, resulting in delays in posting your payment.