

Authorization Agreement for Automatic Payroll Deposits

Attach a voided check to this authorization.

Deposit slips will not be accepted.

Purpose of Authorization

New Authorization
complete sections A, B, and C

Change Authorization
complete sections A, B and D

Cancel Authorization
complete sections A and E

A. Employee Information

First Name _____ Last Name _____

Street address _____

City _____ State _____ Zip _____

Phone Number (____) ____ - ____ Alternate Phone Number (____) ____ - ____

B. Depository information

Financial Institution _____

City _____ State _____ Zip _____

Account Number _____ Routing/Transit/ABA Number _____

Account Type Checking Savings

C. New Authorization Statement

I hereby authorize Better Homes and Gardens Real Estate Alliance, hereinafter called company, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account, indicated above, and the depository named above, hereinafter called depository, to credit and/or debit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. Law.

Signature _____ Date ____ / ____ / ____

D. Change Authorization Statement

I hereby authorize and request company to make the changes indicated on this form, by me, for an automatic deposit of payroll to my account.

Signature _____ Date ____ / ____ / ____

E. Cancellation Statement

I hereby request that company terminate my authorized direct deposit of net amount due from payroll to my account. I will allow a reasonable time for company and depository to act upon my request to terminate this agreement.

Signature _____ Date ____ / ____ / ____
