

## **Electronic Funds Transfer Authorization**

I hereby authorize Caribbean Collectibles Creations to directly deposit my pay in the bank account listed below. I have attached a **voided check** or **deposit slip**. This authorization is to remain in force until the company has received a written authorization from me of its termination or change.

Also, I grant Caribbean Collectibles Creations the right to correct any Electronic Funds Transfer resulting from an erroneous overpayment by debiting my account to the extent of such overpayment.

Name:			
Address:			
Telephone: ()			
Signature:			Date:
Account # (Check only one)	Checking	Savings	
Financial Institution:			
Street Address:			
City, State and Zip Code:			
Telephone: ()			
Personal Account Number:			
Bank ABA (Routing) Number _			

## ATTACH VOIDED CHECK OR DEPOSIT SLIP