

Authorization Agreement for Direct Deposit (ACH Credits)

I (we) hereby authorize **Summit Bookkeeping & Payroll Inc.**, on behalf of _____ (Employer) hereinafter called COMPANY, to initiate credit entries to my (our) () Checking () Savings account (select one) indicated below at the depository named below, hereinafter called DEPOSITORY, and to credit the same to such account.

DEPOSITORY (Bank)

Name: _____ Branch: _____

City: _____ State: _____ Zip: _____

Routing #: _____ Account #: _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Account Signors:

Name: _____ Signed: X _____
(Please print)

Name: _____ Signed: X _____
(Please print)

Date: _____

NOTE: All written credit authorizations should provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

ATTACH HERE!!

**Either a voided check or a copy of a check
from your account for account number
and routing number verification.**