

## Direct Deposit Authorization Form

Please print and complete ALL the information below.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Account #: \_\_\_\_\_

9-Digit Routing #: \_\_\_\_\_

Type of Account:       Checking       Savings      (Circle One)

*Please attach a voided check for bank account to which funds should be deposited.*

Frank Poe Real Estate Company is hereby authorized to electronically credit to the account listed above. This authorization will remain in effect until I modify or cancel it in writing.

Landlord Signature: \_\_\_\_\_

Landlord Email: \_\_\_\_\_

Date: \_\_\_\_\_