

**D.T.S.E. Multi-Employer Services
DIRECT DEPOSIT AUTHORIZATION FORM**

I hereby authorize my employer to direct deposit my paycheck into the bank / credit card account referenced below.

Note:

- This authorization will remain in effect until D.T.S.E., Inc. receives written a notice of termination from the employee referenced above.

- In the event of a direct deposit resulting in an overpayment, The Multi-Employer Services has the authorization to correct any erroneous Electronic Funds Transfer.

Name: _____

Telephone Number: _____

May we text you? Yes ___ No ___

Social Security Number: _____

Email Address: _____

May we email about payments? Yes ___ No ___

| |
|---|
| <p>Name of Financial Institution: _____</p> <p>Account #: _____ \$ _____ % _____</p> <p>Account #: _____ \$ _____ % _____</p> <p>Savings Account #: _____ \$ _____ % _____</p> <p>Transit ABA / Routing #: _____</p> |
|---|

Please **complete** this form, scan and **email it to documents@inc-tax.com**. Once we have a legible image, we will set you up, and you will continue to receive notice of payments.

We can't accept images snapped from a smartphone.

Our physical mail address is: **My Accountant Too, Inc. 6490 W 44th Ave, Wheat Ridge, CO. 80033**

Signature: _____

Date: _____