

My Accountant Too, Inc
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 My Accountant Too receives written a notice of termination from the employee referenced above.
- In the event of a direct deposit resulting in an overpayment, My Accountant Too, Inc. 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 ___

Name of Financial Institution: _____
Account #: _____ \$ _____ % _____
Account #: _____ \$ _____ % _____
Savings Account #: _____ \$ _____ % _____
Transit ABA / Routing #: _____

Please **complete** this form and, scan / snap 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: _____