

Tobin & Associates - Authorization for Direct Deposits - Employee Form

This authorizes Tobin & Associates (the "Company") to send credit entries (and appropriate debit and adjustment entries), electronically, or by any other commercially accepted method, to my (our) account(s) indicated below and to other accounts I identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries.

Account #1

ACCOUNT TYPE	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
BANK NAME	_____	
ACCOUNT NUMBER	_____	
BANK ROUTING NUMBER (ABA#)	_____	
Percentage or Dollar Amount to be deposited to this account	_____	

Account #2 (remainder to be deposited to this account)

ACCOUNT TYPE	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
BANK NAME	_____	
ACCOUNT NUMBER	_____	
BANK ROUTING NUMBER (ABA#)	_____	

This authorization will be in effect until the Company receives a written termination notice from myself and has a reasonable opportunity to act on it.

SIGNATURE

PRINTED NAME

DATE

EMAIL ADDRESS WHERE
WE CAN SEND YOUR PAYSTUB _____

**** Fax (281 – 754- 4584) or scan and email to (tobinco@comcast.net) or mail the completed authorization to: Tobin & Associates, PO Box 7864, Houston, TX 77270