

**AUTHORIZATION FOR ELECTION INTO DIRECT PAYMENT AGREEMENT**

COMPANY NAME: \_\_\_\_\_

I (we) hereby authorize Computer Fellows, to initiate debit entries to my (our)  Checking  Savings account (select one) indicated below, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

DEPOSITORY

NAME: \_\_\_\_\_

BRANCH: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

ROUTING NUMBER: \_\_\_\_\_

ACCOUNT NO: \_\_\_\_\_

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

NAME(S): \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNED: \_\_\_\_\_

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.