DIRECT DEPOSIT AUTHORIZATION

PLEASE COMPLETE THIS FORM AND RETURN TO:

Deep East Texas Council of Governments 210 Premier Drive Jasper, TX 75951

John Q. Smith 99999 55 Maple Street 555-1234 Hometown, NY 550919						
PAY TO THE ORDER OF S DOLLARS						
1;1234567891; 098765432101231 99999						
☐ New setup ☐ Change financial institution						
Cancellation (Leave Part 4 blank)	Change account numberChange account type					
PART 2: Payee Identification Tax ID (Social Security Number or Employer Identification Number) Tax ID (Social Security Number or Employer Identification Number) U I would like to receive correspondence via e-mail. Work Phone Number Home Phone Number						
Tax ID (300iai 3ecunty Number of Employer Identification Number)			Tion	Trome Fridie Number		
Name		E-mail Address				
Address	City			State	ZIP Code	
I hereby request and authorize the Deep East Texas Co into the account specified below and, if necessary, del error. I recognize that, if I fail to provide complete and form may be delayed or that my payments may be erron. This authorization will remain in effect until written amount of time for initiating or terminating Direct I institution information.	bit entried accurate to the course to the co	es and adjustments for any te information on this authoransferred electronically. In terminate is given. The tand is responsible for not	amounts donorization for	leposited ele orm, the pro must allow	ectronically in cessing of the	
Timed N				Date		
PART 4: Financial Institution (Contact your finan		tution for this information, if	necessary.,	+		
Financial Institution Name City		Ste		State	ZIP Code	
Routing Transit Number Customer Account Notes Customer Account Notes Representative Name (Please print)	Number			Consu	Type of Account Consumer Checking Consumer Savings	
Representative Signature					Corporate Checking Corporate Savings	