



Authorization Agreement for Automatic Withdrawals

Client Full Legal Name (not DBA)

Federal EIN

I hereby authorize Payroll4Free.com, Inc., hereinafter called PAYROLL4FREE, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my checking account indicated below, and to debit and/or credit the same to this account. I acknowledge that PAYROLL4FREE will withdraw funds, in the amounts specified using its approval process, and transfer them to my designated employee, payee, or recipient accounts. I also authorize PAYROLL4FREE to debit this account for its fees.

Account Information:

Bank Name

ABA Routing/Transit Number

Account Number

This authorization is to remain in full force and effect until PAYROLL4FREE has received written notification from me of its termination in such time and in such manner as to afford PAYROLL4FREE a reasonable opportunity to act on it.

Client Authorized Signer Name

Client Authorized Signer Title

Client Authorized Signer Signature

Date