

THE TAXPERTS ACCOUNTING SERVICES

-----CERTIFIED PUBLIC ACCOUNTANT-----

Direct Debit Authorization Form

Bank Name: _____

Address: _____

City: _____ State: _____ Postal Code: _____

ABA Routing #: _____

Account Number: _____

Accounting type: Checking _____ Saving _____

One-time authorization: Amount \$: _____

Recurring authorization: Amount \$: _____

Name on Account: _____

Direct Telephone: (_____) _____ - _____

I hereby authorize The Taxperts Accounting Services, PC, CPA to initiate debit and/or credit entries to my Checking/Savings account at the bank named above for services provided. This includes initiating electronic debit entries, and if necessary, credit entries and adjustments for errors to my checking and/or saving account. This authorization will remain in effect until I have cancelled it in writing.

Signature

Date



America Counts on CPAs®