



TECHPROSE DIRECT DEPOSIT AUTHORIZATION FORM (Mandatory)

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|---|---|
| <input type="checkbox"/> This is a NEW Direct Deposit Request | <input type="checkbox"/> This is a CHANGE to an EXISTING Direct Deposit |
|---|---|

I hereby authorize TechProse, hereafter called Company, to initiate credit entries and if necessary, initiate debit entries and adjustments for any credit entries in error to my account(s) indicated below and the depository(s) name below, hereafter call Depository(s), to credit and debit the same entries to such account(s).

Fax to: 925-956-4233 or Mail to: 3100 Oak Road., Suite 205, Walnut Creek, CA 94597, Attn: Human Resources

| | |
|-----------------|--|
| Employee's Name | |
|-----------------|--|

Account #1

| | |
|--|--|
| Account Type (Checking or Savings): | |
| Bank Transit/ABA #: | |
| Bank Account #: | |
| Dollar Amount to be deposited into this account: | |

Account #2

| | |
|--|--|
| Account Type (Checking or Savings): | |
| Bank Transit/ABA #: | |
| Bank Account #: | |
| Dollar Amount to be deposited into this account: | |

This authority remains in full force and effect until Company has received written notification from me or its termination in such time and in such manner as to afford Company a reasonable time to act on it. I understand direct deposit will begin.

| | | |
|--|-------|-------|
| Employee's Name and Date Employee's Signature | _____ | _____ |
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NOTE: Please staple a VOIDED check below to validate account information

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