



TECHPROSE DIRECT DEPOSIT AUTHORIZATION FORM

<input type="checkbox"/> This is a NEW Direct Deposit Request	<input type="checkbox"/> This is a CHANGE to an EXISTING Direct Deposit
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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: 925-299-3933 or Mail to: 3685 Mt. Diablo Blvd., Suite 340, Lafayette, CA 94549, Attn: Human Resources

Employee's Name	
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Account #1

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

Account #2

Account Type (Checking or Savings):	
Bank Account #:	
Bank Transit/ABA #:	
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 approximately 2 payrolls after Company receives authorization.

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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