

DRISCOLL PROPERTY MANAGEMENT

142 N. Brown Street

Rhineland, WI 54501

715.362.3040

fax 715.362.3043

DIRECT DEPOSIT AUTHORIZATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I hereby request and authorize Driscoll Property Management to deposit payments by electronic funds transfer into the account specified below and, if necessary, debit entries and adjustments for any amounts deposited electronically in error. I recognize that, if I fail to provide complete and accurate information on this authorization form, the processing of the form may be delayed or that my payments may be erroneously transferred electronically.

This authorization will remain in effect until written notice to terminate is given. The undersigned must allow a reasonable amount of time for initiating or terminating Direct Deposit and is responsible for notification of any change in financial institution information.

Signature: _____ Date: _____

Printed Name: _____

Financial Institution Name: _____

City: _____ State: _____ Zip: _____

9-Digit Routing Transit Number: _____

Bank Account Number: _____

Type of Account: Personal Checking Business Checking
 Personal Savings Business Savings

Please send my monthly reports via:

email to address above

regular mail

Gary Driscoll
Owner
gary@driscollpm.com

visit us at driscollpm.com

Amy Cirilli
Office Administrator/ Manager
amy@driscollpm.com