AUTHORIZATION AGREEMENT FOR AUTOMATED PAYROLL DEPOSIT

I(we) hereby authorize and request the company named below, hereinafter called COMPANY, to initiate deposits and to initiate, if necessary, withdrawal entries and adjustments for any deposit entries in error to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to deposit or withdraw from such account.

This authority is to remain in full force and effect until COMPANY and FINANCIAL INSTITUTION receive notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY or FINANCIAL INSTITUTION a reasonable opportunity to act on it.

EMPLOYEE INFORMATION:

Company/Employer Name		
Monarch Properties, 1	Inc.	
Employee ID #	Employee's Name	
Employee's Financial Institution		Financial Institution's 9 Digit Transit Routing #
Employee's Checking or Savings Account	#	Circle Type of Account
		Checking / Savings
Employee's Signature		Date

ATTACH VOIDED CHECK FOR CHECKING OR MONEY MARKET ACCOUNT