Altitude Energy

Payroll Direct Deposit Authorization Form

Name		Date
Type of Transaction Start OAdd OChange OCancel For Add/Change: 1# % or \$	Type of Account Savings Checking	Routing Number
Financial Institution	Account Number	City, State, Zip Code
		•
Type of Transaction Start Add Change Cancel For Add/Change: 2# % or \$	Type of Account Savings Checking	Routing Number
Financial Institution	Account Number	City, State, Zip Code
Type of Transaction Ostart OAdd OChange OCancel	Type of Account O Savings OChecking	Routing Number
For Add/Change: 3# % or \$		
Financial Institution	Account Number	City, State, Zip Code
Staple a Voided personal check for ea	ach account	
I hereby authorize Altitude Energy to to electronically debit my (our) accou	, , , ,	• • • • • • • • • • • • • • • • • • • •
I (we) understand that this authorization will remain in full force and effect until I (we) notify Altitude Energy in writing thay I (we) wish to revoke this authorization.		
Signature	D	Date