

THE BLACK HISTORY CARD ELECTRONIC FUNDS TRANSFER AUTHORIZATION

I hereby authorize my employer to directly deposit my pay in the bank account listed below. This authorization is to remain in force until the company has received written authorization from me of its termination or change.

| | | | |
|---|----------------|------------------------|--|
| Name: | | | |
| Address: | | | |
| Telephone: | () | | |
| Signature: | | Date: | |
| Debit Card Number: | | | |
| | | | |
| Financial Institution: Palm Desert National Bank | | | |
| Address: 73-745 El Paseo Palm Desert, California 92260 | | | |
| Telephone: | (760) 340-1145 | | |
| | | | |
| Company Use Only: | | Effective Date: | |
| Company Use Only: Bank/ABA Number: 1222-3858-5 | | 1 | |