

**AUTHORIZATION AGREEMENT FOR
DIRECT DEPOSITS**

By completing this Direct Deposit Agreement, you agree as follows:

1. you authorize and direct Freedom Property Mgmt., LLC to deposit your net cash flow pay directly into your account at the financial institution indicated below;
2. you authorize Freedom Property Mgmt., LLC to reverse (make a debit entry) in the event a deposit error is made;
3. you understand and acknowledge that, if you change financial institutions or accounts or if you wish to cancel this Agreement, you are responsible for notifying us, at least fourteen (14) days in advance of such change to the financial institution an opportunity to act on the instructions.

Account listed below and the financial institution named below, hereinafter called DEPOSITORY, to credit or debit the same such account.

Depository Name City State Zip Code

Routing/Transit/ABA Number Account Number

*Please attach a voided check from your savings account or photocopy of a check on the above account so that we may verify the numbers provided.
PLEASE DO NOT SEND DEPOSIT SLIPS!*

Name(s) on Account (**Please Print**)

Date Signature Signature

Email Address (required for all ACH deposits)