



## OWNER DIRECT DEPOSIT AUTHORIZATION FORM

Account Type:       Checking                       Savings

Name of Bank: \_\_\_\_\_

Bank Routing #: \_\_\_\_\_

Bank Account #: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

- Monthly Statements will be sent out via email on the day the payment is processed.
- The deposit will be posted to your account no later than the 2<sup>nd</sup> business day after it is processed.
- Direct Deposit is only available for U.S. Bank Accounts.

Reed & Associates of TN, LLC is hereby authorized to make electronic deposits to the account listed above. This authorization will remain in effect until I modify or cancel it in writing.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form to: [PM@MyReedHome.com](mailto:PM@MyReedHome.com) or  
269 Germantown Bend Cove, Suite 101, Cordova, TN 38018

Please call (901) 758-1133 if you have any questions.