

## DIRECT DEPOSIT AUTHORIZATION FORM

This form authorizes the transfer of your deposit to the account specified at the financial institution listed below. For more details visit, [bankoftexas.com/INSERT\\_HERE](http://bankoftexas.com/INSERT_HERE).

### Financial Institution Details:

<b>Name</b>	<b>Address</b>	<b>City</b>
Bank of Albuquerque	PO Box 2300	Tulsa
<b>State</b>	<b>ZIP Code</b>	<b>Telephone</b>
Oklahoma	74192	(800) 346-5312

### Routing Number

107006606

### Your Information:

Name	Address	City
State	ZIP Code	

### Account Details:

Type of Account (Checking/Savings/MMA)      Account Number

### Employer Details:

I authorize \_\_\_\_\_ (*name of employer*) to automatically deposit my paycheck into my account listed above (*this includes my authorization to correct entries made in error*). This authorization will remain in effect until I give written notice to cancel it.

Your Signature

Date