

2023 DIRECT DEPOSIT AUTHORIZATION

Please print and complete ALL the information below.

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP _____

YOUR NAME 123
1234 Main Street
Anywhere, OH 00000

DATE _____

PAY TO THE ORDER OF _____ \$ _____
_____ DOLLARS

⑆044072324 ⑆000123456789 ⑆123

ROUTING NUMBER ACCOUNT NUMBER CHECK NUMBER

NAME OF BANK _____

ACCOUNT # _____

9-DIGIT ROUTING # _____

TYPE OF ACCOUNT Checking Savings (Check one)

Terry Mattox Racing, LLC is herby authorized to directly deposit my pay to the account listed above. This authorization will remain in effect until I modify or cancel it in writing. This authorization is good from January 1, 2023, to December 31, 2023.

Signature (Name on Account): _____

Date: _____

A W9 matching the person with the account above must accompany this form.