

AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS DIRECT DEPOSIT

Company Name: Trendtec Inc.

I (we) hereby authorize Trendtec Inc., herein called Company, to initiate CREDIT entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) **CHECKING** **SAVINGS** account (select One) indicated below and the depository named below, herein called DEPOSITORY, to credit and/or debit the same to such account.

Depository Bank Name

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

(Please Print Name)

(SS Number, last 4 digits only)

(Signature)

(Date)

I understand that monies will be deposited to my account on Friday providing my timecard is on time _____ initial

Time cards are due on Monday by 5:00PM _____ initial

I understand that I will receive my check stub by (mark an option) _____ initial

CHOOSE ONE

Mail to home address _____

Pick-up at our office _____

Email _____

E-mail Address:

(Watch for your welcome email from PostLock)

I have attach a voided check or bank document (Required by Trendtec's Bank) _____ initial

IN THE EVENT OF INCOMPLETE/ MISSING INFORMATION A LIVE PRINTED CHECK WILL BE MAILED.

DO NOT WRITE BELOW THIS LINE