

Authorization for Direct Deposit

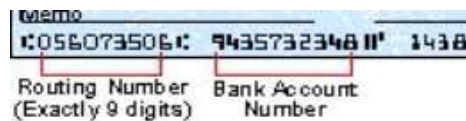
I hereby authorize **Zenius** (the "Company") to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my account(s) indicated below. This authorization will be in effect until the Company receives written termination notice from myself and has a reasonable opportunity to act on it.

For a checking account, attach a voided check. For a savings account, attach evidence of your account number and routing number for that financial institution.

Zenius assumes no responsibility for errors or delays by a financial institution in crediting accounts or for failure to notify account (s) changes if any.

	Bank Routing #:	Bank Name	Account Number	Acct Type (Checking/Savings)	Amount per Invoice (% or \$)
1					Invoice Balance

Check Example (bottom left corner of check)



Requestor & Authorization Information	
Name:	
Email address:	
Signature:	
Date:	