AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH TRANSFERS)

(This service is available only to bank accounts within the United States.)

I hereby authorize Music Services, Inc. to electronically deposit any and all royalty payments due me into my bank account established at the Financial Institution and under the Account Number indicated below. If money to which I am not entitled is deposited to my account, I hereby authorize Music Services, Inc. to direct the Financial Institution to return or credit said funds. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U. S. law.

Financial Institution Name _____

Person/Business Account Name _____

Type of Account *(please select one):* **Checking _____ Business acct? ___ Personal acct?___**
-- or --
Savings _____ Business acct? ___ Personal acct?___

Routing Number _____ Account Number _____
(Note: The Routing Number is commonly a 9-digit number that appears at the bottom left of the check. See example below.)

Sample Check (Please send a voided check, not a deposit slip.)

Account Name
Account Address
Account City, State, Zip

Check No. xxxx
Date _____

Pay to the Order of _____ $ _____

_____ Dollars

Memo _____ _____
Signature

xxxx 123456789 099999-9999999
(Check No.) *(Routing Number)* *(Account Number)*

This authorization will remain in full force and effect until I have filed a new authorization, or until revoked by me in writing to Music Services, Inc., 5409 Maryland Way, Suite 200, Brentwood, TN, 37027, in such manner as to afford Music Services and the Financial Institution a reasonable opportunity to act on it. This authorization is applicable to the following account at Music Services:

Music Services Account # (if known) _____
Name on the Music Services Account _____
Address on the Music Services Account _____
City, State, Zip on the Music Services Account _____

Agreed to by:
Name (printed) _____
Contact information: Phone _____ Email _____
(In case we need to contact you regarding this matter)

Signature _____ Date _____

Please mail this completed form and voided check to: Music Services, Inc. (Attn: Finance), 5409 Maryland Way, Suite 200, Brentwood, TN 37027. Fax can be sent to 615-371-1351. A pdf scan can be sent to don@musicservices.org.