

AUTHORIZATION FOR DIRECT DEPOSIT

This authorizes Market South Management to send credit entries electronically or by any other commercially accepted method, to my account listed below, and to other accounts I identify in the future. This authorizes the financial institution holding the account to post all such entries. Please include a VOIDED CHECK as the routing number on the deposit slip may be different on your check.

Account Type (e.g. Checking or Savings) _	
Name of Bank	
Branch	
City	State
Bank Routing #	
Account #	
This authorization will remain in effect written termination notice from myself and	until Market South Management receives a has a reasonable opportunity to act on it.
Signature	Date
Printed Name	
Rental Property Address	
Email Address	

Revised 12/05/2011