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OWNER DIRECT DEPOSIT AUTHORIZATION FORM

Print Name (as appears on accord	unt):	
Managed Rental Property:		
Bank Name:		
Routing #:		
Account #:		
I hereby authorize RE Solution credit entries to my account at the first	ancial institution indicated of	mounts owed to me, by initiating on this form. written notice of any change in
ter's Printed Name Date	Owner	Date
	By:	
Broker's Associate's Signature		
	Owner	Date

By:___