



708 Heartland Trail, Suite 2000, Madison, WI 53717-2099 608-829-5100 • 800-558-2676 • FAX 608-829-6061

**AUTHORIZATION AGREEMENT
AUTOMATIC DIRECT DEPOSIT**

I hereby authorize H&N Logistics, LLC to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to credit and/or debit the same to such account.

(Financial Institution Name) (Branch)

(Address) (City/State) (Zip Code)

(Financial Institution Phone Number)

(Routing Number) (Account Number) Type of Acct: ___ Checking ___ Savings

This authority is to remain in full force and effect until H&N Logistics, LLC has received written notification from me of its termination in such time and manner as to afford H&N Logistics, LLC and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

(Email Address of which remittance should be sent)

Please Attach Voided Check

(Print Company Name or Individual Name)

(Signature)

(Date)