



DA Communications Inc.

Authorization for Direct Deposit

This authorizes DA Communications, Inc. (the "Company") to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account indicated below and to other accounts I (we) identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries.

Account Type (e.g. Checking, Savings, Loan . . .)

Employee Bank Name

Branch

City

State

Zip

Bank Routing Number (ABA#)

Account #

This authorization will be in effect until the Company receives a written termination notice from myself and has a reasonable opportunity to act on it.

Signature

Printed Name

Employee ID#

Date