WORD & BROWN
CONTRACTOR'S CHOICE
PREVAILING WAGE HOUR BANK PROGRAM

721 S. Parker, Suite 200 Orange, CA 92868
(800)542-4218 • (714) 542-4200

Authorization Agreement for Direct Deposit of Commissions

A Agency/Broker Information

Agency Name

Agency Tax ID Number (If applicable)

Broker Name

Broker Social Security Number (required)

Broker Phone Number	**Broker Fax Number**
Broker Email Address	**Please check how you would like to receive your commission statement** ❒ Mail ❒ Fax ❒ E-mail
Please Select Desired Transaction ❒ Set-up ❒ Change ❒ Cancel	**Bank Account Type** ❒ Checking ❒ Savings

B Bank Information

Bank Name

Bank Telephone Number

Your Account Number

Bank Routing Number

Branch Address

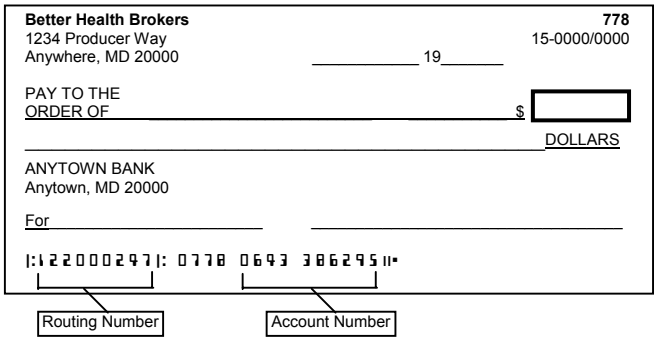
City **State** **Zip**

AUTHORIZATION STATEMENT
I authorize Contractors Choice and the bank indicated to deposit my net commissions automatically into my account each commission cycle. If funds to which I am not entitled are deposited into my account, I authorize Contractors Choice to direct the bank to return said funds. This authority will remain in effect until I have either cancelled it in writing or upon issuance of written notice from the Company.

BROKER SIGNATURE _____ DATE _____

PRINT NAME _____

Where to locate your bank account information:



WHEN COMPLETED, PLEASE RETURN TO: → **CONTRACTORS CHOICE**
(ORIGINAL SIGNATURE REQUIRED—DO NOT FAX)
721 S PARKER, SUITE 200
ORANGE, CA 92868
ATTENTION: FINANCE

3/11/03