



P. O. Box 2080
Conway, AR 72033

Fax 800-750-8155
Phone 501-336-0077

DIRECT DEPOSIT AUTHORIZATION FORM

I _____ authorize ForMor International
(MEMBER NAME AND ID#)

or its agent, to direct deposit any bonus monies due to me to the bank account number listed on the attached check. This authorization is to remain in effect until ForMor International receives written notice from me revoking this authorization.

DATE

SIGNATURE

Please attach a VOIDED check for direct deposit