



# Confederated Tribes of Siletz Indians

ATTN: ACCOUNTING

PO BOX 549

SILETZ, OR 97380

## AUTHORIZATION FOR DIRECT DEPOSIT

### 3 Easy Steps !

1. Fill out this form.
2. Attach a voided check to this form to confirm your account and routing numbers.
3. Submit this completed form and a voided check to:

CTSI  
Attn: Accounting  
PO Box 549  
Siletz, OR 97380

### Personal Information:

First Name Middle Initial Last Name

Roll Number DOB

Phone Number

E-mail

### Account Information:

Financial Institution Name

Routing Number Account Number

Select one:  Checking  
 Saving  
 Other

*Using a Pre-paid debit card? Please contact your financial institution and request the Routing Number and Account Number for a direct deposit.*

I hereby authorize Siletz Management LLC to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account listed above. The authorization will remain in effect until I have filed a new authorization, or until this authorization is revoked by me in writing.

Signature

Date