Direct Deposit Authorization

TAX YEAR 2026 | 2027 FILING SEASON | DRAFT FOR REVIEW

Client name: _____ Date: _____

Complete only through the approved secure channel. Verify routing and account numbers against bank records. This worksheet records your preference; it does not replace official filing or bank authorization forms. Refund timing is not guaranteed. Do not send completed form by email or text.

Account holder name / bank name

Routing number (9 digits)

Account number

Account type: checking / savings

Refund allocation if applicable (discuss with preparer)

Confirm account ownership and verified numbers (initials)

Client signature: _____ Date: _____

Spouse signature (if applicable): _____ Date: _____