

Bank Account Authorization

I request and authorize the Coalition of Community Assistance Volunteers, Inc. to cause my income tax refund to be deposited into the following account:

Name of Financial Institution _____

Routing Number _____

Account Number _____

I certify that the account is in my name, or that I am a legal signer on the account. I further agree to hold harmless the Coalition of Community Assistance Volunteers, Inc., if the information I have provided is incorrect.

Taxpayer's signature

Date

Taxpayer's Social Security Number