

**MILLS ESCROW COMPANY**

6501 Boeing, Suite H-4  
P. O. Box 371805  
El Paso, TX 79937  
915-771-8006 Voice/915-771-8233 Fax  
Email info@millsescrow.com

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DATE: \_\_\_\_\_

RE: Investor Income Instructions

In order to process your request that Mills Escrow direct deposit your income directly into your account each month we will need the following information:

Bank: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Account Title: \_\_\_\_\_

Checking Account Number: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

You must notify us ten (10) days prior to the "deposit date" if there are any changes to the above. Please include a voided check.

Your signature is needed to authorize this direct deposit process each month.

\_\_\_\_\_

\_\_\_\_\_  
**DATE**

\_\_\_\_\_

\_\_\_\_\_  
**DATE**

Should you have any questions or need any additional information regarding this process, please feel free to contact me.

With kindest regards, I am,

Sincerely yours,

MILLS ESCROW COMPANY

Joye Mills, President

JPM:sp