

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDITS)

COMPANY
NAME _____

COMPANY
ID NUMBER _____

I (we) hereby authorize _____, hereafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) (____)Checking (____)Savings account (**select one**) indicated below at the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

DEPOSITORY
NAME _____ BRANCH _____

CITY _____ STATE _____

ROUTING NUMBER _____ ACCOUNT NO. _____

This authorization is to remain in full force and effect COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

NAME(S) _____ ID NUMBER _____

PLEASE PRINT

DATE _____ SIGNED x _____ SIGNED x _____

NOTE: ALL WRITTEN CREDIT AUTHORIZATIONS SHOULD PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.