

**CONSUMER AUTHORIZATION FOR DIRECT DEPOSIT VIA ACH
(ACH DEBITS)**

Direct Payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment.

I (we) authorize _____ ("COMPANY") to electronically debit my (our) account
(COMPANY NAME)
(And, if necessary, electronically credit my (our) account to correct erroneous debits¹) as follows:

Checking Account/ Savings Account (select one) at the depository financial institution named below ("DEPOSITORY"). I (we) agree that ACH transactions I (we) authorize comply with all applicable law.

Depository Name _____

Routing Number _____ Account Number _____

Amount of debit(s) or method of determining amount of debit(s) [or specific range of acceptable dollar amounts authorized]: _____

Date(s) and/or frequency of debit(s): _____

I (we) understand that this authorization will remain in full force and effect until I (we) notify COMPANY [insert manner of revocation, i.e., in writing, by phone, or in person that I (we) wish to revoke this authorization. I (we) understand that COMPANY requires at least [___ days/weeks] prior notice in order to cancel this authorization.²

Name(s) _____
(Please Print)

Date _____ Signature(s) _____

FOR COMPANY USE ONLY

Note: Signed authorization must be retained for a period of two years following the termination or revocation of the authorization.

Date Received _____ Processed by _____

¹ The NACHA Operating Rules do not require the consumer's express authorization to initiate Reversing Entries to correct erroneous transactions. However, Originators should consider obtaining express authorization of debits or credits to correct errors.

² Written debit authorizations must provide that the Receiver may revoke the authorization only by notifying the Originator in the time and manner stated in the authorization. The reference to notification should be filled with a statement of the time and manner that notification must be given in order to provide company a reasonable opportunity to act on it (e.g., "In writing by mail to _____ (contact & address) that is received at least three (3) days prior to the proposed effective date of the termination of authorization").