



Company Name \_\_\_\_\_ Company ID Number \_\_\_\_\_

I (we) hereby authorize \_\_\_\_\_ hereinafter called COMPANY, to initiate credit entries to my (our)
 Checking Account/  Savings Account (select one) indicated below at the depository financial institution named
below, hereinafter called DEPOSITORY, and to credit the same to such account. I (we) acknowledge that the origination of
ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Name \_\_\_\_\_ Branch \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

Account Name \_\_\_\_\_

This authorization is to remain in full force and effect until 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 \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

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