

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

(Company Name)

I (we) hereby authorize _____, hereinafter called COMPANY, to initiate domestic debit entries and if necessary, credit entries and adjustments for any debit entries in error to my (our) Checking Account/ Savings Account (select one) indicated below at the depository bank named below, hereinafter called DEPOSITORY, and to debit 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 including laws governing the Office of Foreign Assets Control (OFAC).

Depository (Bank) Name _____ Branch _____
City _____ State _____ Zip _____
Routing Number _____ Account Number _____
Amount _____ Frequency _____

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 _____
Signature(s) _____ Date _____

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.

FOR COMPANY USE ONLY

Date received: _____ **Processed by:** _____