

Credit Authorization

I (we) hereby authorize (Company Name) _____, hereinafter called COMPANY to initiate credit entries for (Applicant) _____ to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to credit the same account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

(Financial Institution Name)

(Branch)

(Address)

(City/State)

(Zip)

(Routing Number)

(Account Number)

Type of Acct: _____ Checking _____ Savings

This authority 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 manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

(Print Individual Name)

(Signature)

(Print Individual ID Number)

(Date)

PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM!

Notes:

- All written credit authorizations must provide that the Receiver may revoke the authorization only by notifying the Originator in the manner specified in the authorization
- Single entry reversals do not require authorization by the Receiver. Therefore, previously recommended language regarding the initiation of possible debit is no longer stated in the authorization.
- The underlined language in the authorization above represents the disclosure requirement associated with the clarification of OFAC economic sanction policies upon ACH Network Participants.