Consumer Authorization for ACH Credit Entries

Consumer Authorization for ACH Credit Entries Company Name: _____ _____("COMPANY") hereinafter called COMPANY, to initiate credit entries I (we) hereby authorize_____ 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 and the depository named below, hereinafter called DEPOSITORY, to credit and/or 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. Account City: _____ State: ____ Zip: ____ Routing Transit/ABA No:_____ Checking Account / Savings Account (select one) at the depository financial institution ("DEPOSITORY") named below. Account Number: _____ Authorization 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 in such manner as to afford COMPANY a reasonable opportunity to act on it. I am an authorized signer, or otherwise have authority to act, on the account identified above. Date: _____ Owner Signature: Owner Name (Printed):