

ACH CREDITS AUTHORIZATION FOR DIRECT DEPOSIT

Company Account Information

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDITS)		
(Company Name)	Company ID Number:	
I (we) hereby authorize _____ hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) <input type="checkbox"/> checking <input type="checkbox"/> savings account (check one) indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.		
DEPOSITORY/BANK NAME:		BRANCH:
CITY:	STATE:	ZIP:
TRANSIT/ABA NUMBER:		ACCOUNT NUMBER:
This authority is to remain in full force and effect until COMPANY has received 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 upon it.		
NAME(S):		ID NUMBER:
DATE:	SIGNATURE:	