

Authorization Agreement for Automatic Credits/Debits (ACH)

Depository Name:	Branch:
	State: Zip:
ROUTING# Transit/ABA No:	
BANK Account Number:	Amount: \$
One-Time Date:	OR Recurring Date: 15TH
us) of its termination in such time	and effect until COMPANY has received written notification from me (or eit and in such manner as to afford COMPANY and DEPOSITORY a reason
opportunity to act on it. Direct cred COMPANY. Dishonored direct creditation. Name(s):	nd in such manner as to afford COMPANY and DEPOSITORY a reason soldebits returned to COMPANY dishonored will be assessed a fee of \$25. If the deposit of the
opportunity to act on it. Direct cred COMPANY. Dishonored direct creditation. Name(s): Signature: Note: All written CREDIT/DEBIT of by notifying the originator in the man	nd in such manner as to afford COMPANY and DEPOSITORY a reason sydebits returned to COMPANY dishonored will be assessed a fee of \$25. Indebits WILL NOT be re-originated. WATER Account Number: Date: Inthorizations MUST provide that the receiver may revoke the authorization are specified in the authorization.
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