

Authority Agreement for Pre-Authorized Credits

Please complete and sign the authorization for automatic deposits to other financial institutions. Your transit ABA # is the 1st nine numbers on the bottom left side of your check. Don't forget to attach a voided check that represents the bank account you want to be credited with your paycheck.

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT (ACH CREDIT)

COMPANY NAME: INCORPORATED VILLAGE OF FREEPORT

I(We) herby authorize the Incorporated Village of Freeport , 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) account, select one from below;

- () Checking
- () Savings Account

Hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

DEPOSITORY

NAME: _____ **BRANCH:** _____

CITY _____ **STATE:** _____ **ZIP:** _____

TRANSIT/ABA#: _____ **ACCOUNT#:** _____

This authority is to remain in full force and effect until the Incorporated Village of Freeport has received written notification from me(or either of us) of its termination in such time and in such manner as to afford the Incorporated Village of Freeport and Depository a reasonable opportunity to act on it.

NAME(S): _____ **Sign:** _____

_____ **Sign:** _____

Date: _____

Date: _____
