



ACH AUTHORIZATION FORM

Member Name: _____ Account Number: _____
Checking Savings

AUTHORIZATION AGREEMENT FOR ACH TRANSFERS (Transfers Between Financial Institutions Form)

I (we) hereby authorize MO Electric Cooperatives Employees' Credit Union, hereinafter called COMPANY, to initiate, at the member's request, Credit (withdraw from MECECU account) and Debit (deposit to MECECU account) entries to and/or from my (our) Checking and/or Savings account and the depository financial institution named below, hereinafter called DEPOSITORY, and credit and/or debit the same to such account.

Financial Institution (FI Name) _____

City _____ State _____ Zip _____ Phone Number _____

Routing No. _____ Checking # _____ Savings # _____

Do you have the authority to initiate ACH transactions on the financial institutions listed above and is your name listed as an owner on these accounts? Yes No

<u>Non-Recurring / Occasional</u> (date and amount controlled by member) <u>Recurring Transfer</u> Transfer \$ _____ _____, Beginning	<u>Make A Loan Payment</u> Loan Number _____ Transfer \$ _____ _____, Beginning	<u>Visa Credit Card Payments</u> Minimum Payment Statement Balance Monthly Amount of \$ _____
---	--	--

AUTHORIZATION

I (we) acknowledge that the origination of the ACH transactions to my (our) account must comply with the provisions of U.S. law. This authorization is to remain in full force and effect until COMPANY has received written notification from me (us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Signature _____ Date _____ Signature _____ Date _____

Signature _____ Date _____ Signature _____ Date _____