



ACH Payment Authorization Form

I _____ authorize America's Credit Union to charge my Financial Institution account (full name) indicated below for the following one-time or scheduled recurring amount.

Amount: _____

[] One-Time Payment

[] Recurring Payment Schedule

ACU Account number _____

ACU Account number _____

One-Time Payment Date: _____

Frequency: _____ (i.e. weekly, bi-weekly, semi-monthly etc.)

_____ fee applies to all One-Time Payments

Effective Date: _____

Day(s) of month to debit: _____

Fee GL 131995

Financial Institution

[] Checking

[] Savings

Name on Acct: _____ (Must be consumer account)

F.I. Name: _____

Account Number: _____

Bank Routing #: _____

Bank City/State: _____

Member Contact Information

Phone#: _____

Email: _____

SIGNATURE _____ DATE _____

For a One Time Payment, this authorization is for a single transaction on or after the indicated date. For a Recurring Payment Schedule, I understand that this authorization will remain in effect until I cancel it, and I agree to notify America's Credit Union of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above transaction dates. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF), I understand that America's Credit Union may at its discretion attempt to process the payment again within 30 days, and I agree to an additional charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. After three consecutive returned NSF payments, ACU may terminate this agreement. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I agree not to dispute this recurring billing with my bank so long as the transactions correspond to the terms indicated in this authorization form.