



## AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDIT)

Company Name \_\_\_\_\_

I (we) hereby authorize \_\_\_\_\_, hereinafter called

Company, to initiate credits to my (our) ( ) Checking ( ) Savings Account at United

Community Credit Union, hereinafter call Depository, to credit, the same to such account.

**313082171**

ABA Number

Member Account Number

**This authorization is to remain in full force and effect until Company has received written 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 on it.**

Name \_\_\_\_\_ ID Number \_\_\_\_\_

(Please print)

Date \_\_\_\_\_ Signature \_\_\_\_\_

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