

AUTHORIZATION for DRAFT (ACH DEBIT)

I (we) hereby authorize Tennessee Fraternal Order of Police Lodge 54, hereinafter called "COMPANY", to initiate electronic debit entries to my (our) account indicated below and the financial institution named below, hereinafter called "FINANCIAL INSTITUTION". I (we) acknowledge that ACH transactions I (we) authorize to my (our) account must comply with all applicable law.

Financial Institution _____ Branch _____

Address _____

City/State/Zip _____

Routing Number _____ Account Number _____

Type of Account: _____ Checking _____ Savings _____

Amount (or how amount is determined): \$15

Frequency (Weekly, Monthly etc.): Monthly Start Date (if recurring): /01/2019

Date of Debit (s): 1st Day of Each Month

If the debit is recurring and the date of the debit falls on a non-banking day, the debit will hit your account on the next banking day and will not hit your account prior to the authorized date.

(Note: For varying amounts the company must send, based on the *NACHA Operating Rules*, written notification of the amount and the date on or after which the transfer will be debited at least ten calendar days in advance of the debit. If the date varies, the *Rules* state that the Originator must send the Receiver notification of new date at least seven calendar days in advance of the debit.)

This authority 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 manner as to afford Company and Financial Institution a reasonable opportunity to act on it.

ATTACH VOIDED CHECK

Print or Type Individual Name _____

Signature _____

Date _____