

ACH Origination Authorization Agreement MORTGAGE PAYMENT

Formation Credit Union M	lember Information		
Name:	Member #	Share #	Loan #
Financial Institution Infor			
Depository Institution Name	:		
Routing # (must be 9 digits):	Account	#	
Check One: ☐ Savings ☐	☐ Checking ☐ Loan		
As a convenience to me, I here entries from my account at the funds and, if necessary, adjustr authorize the Depository Institu	ming (credit a Formation Cred by request and authorize Formation e Depository Institution above in o ments for any entries in error to my ution above to withdraw the same for	Credit Union to in rder to establish a Formation Credit U	itiate withdrawal utomatic transfer of Jnion account. I also
Frequency (check one):	☐ One Time ☐ Monthly		
Amount: \$ Effective/Start Date:	☐ Current payment due*** End Date:		
currently due. This payment cou	rmation Credit Union will draft the mould be more or less than the payment such as additional funds were drawn	designated above.	The payment could
writing that I wish to revoke this business days' notice prior to the that if any transfer of funds is re inadvertently, there will be a \$30 for each return. The authorized from Depository Institution, unless	tion will remain in full force and effects authorization. I understand that Forme next transfer date to guarantee a casturned UNPAID, whether with or with 0.00 Non-Sufficient Funds fee drafted transfer will be canceled after the sees it is paying a loan at Formation Crest transfer date. I acknowledge that the	mation Credit Unior ancel of this authori nout cause and whe from my Formation cond return due to edit Union. In which	n requires at least 3 zation. I further agree other intentionally or n Credit Union accoun unpaid funds notice n case, the authorized
Member Signature		Date	