

ACH CREDIT/DEBIT AUTHORIZATION

YOU MUST BE THE OWNER ON BOTH FROM AND TO ACCOUNTS

new cancel amount changed date change frequency change

FROM:

(Financial Institution Name)

(Address)(City/State)(Zip)

ABA Routing # Acct# Type C, S

TO:

Gesa Credit Union
51 Gage Blvd.
Richland, WA 99352

325181248 _____
ABA Routing # Acct# Type C, S, L

TO:

(Financial Institution Name)

(Address)(City/State)(Zip)

ABA Routing # Acct# Type C, S, L

FROM:

Gesa Credit Union
51 Gage Blvd.
Richland, WA 99352

325181248 _____
ABA Routing # Acct# Type C, S

**COPY OF CHECK - PRENOTE
REQUIRED IF CHECK COPY IS NOT
AVAILABLE.**

Jane Doe 101 Anydrive Hometown, IN 46278	5600
_____	\$ <input type="text"/>
_____	DOLLARS
MEMO _____	

FREQUENCY (check one) single payment biweekly monthly quarterly annually

Start Date: _____ Amount: _____

**Please allow 3 business days for the actual transaction to take place.
Start date should be a minimum of 3 business days prior to loan date.**

This authority is to remain in full force and effect until Gesa Credit Union has received written notification from me (or either of us if this is a joint account) of its termination in such time and manner as to afford Gesa Credit Union and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

You must contact Gesa Credit Union when your loan is paid in full to ensure a complete stop of the ACH transfer of funds.

Member Signature: _____ Printed Name: _____

By signing this form I am agreeing to all terms and conditions listed on the back of this form.

Date: _____ Phone # _____ Branch Employee: _____

PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM

All written debit authorizations must provide that the Receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

This form must be faxed by 11:00 AM to **509-943-9836** for same day processing.

- I understand all entries transmitted by myself and the credit union are bound by the NACHA Operating Rules; I have authorization to debit or credit the account at the Receiving financial institution.
- I agree not to violate the laws of the U.S. by generating transactions to any account blocked by the Office of Foreign Asset Control (OFAC)
- Credit Union will make every effort to process, transmit and settle for transactions, but is not liable for any inconsequential special, punitive or indirect loss or damage if the transaction is delayed.
- I understand that if the account number and name on the transaction are inconsistent, the receiving financial institution may credit/debit the account solely on the account number.
- I agree to maintain an account at the Credit Union with available funds to cover any credit entries transmitted on the member's behalf; or fund any returns received for prior debit entries transmitted on the member's behalf; or fund any returns received for prior debit entries transmitted by Credit Union during the term of the agreement. Credit Union may debit any account maintained by member to satisfy amounts owed.