



CASA of Titus, Camp and Morris Counties

P.O. Box 2506 – Mt. Pleasant, TX 75456 – (903) 717-8940 – Fax (903) 717-8959

email: michelle.wdrff@gmail.com or website: www.casatcm.org

"Voice for the Voiceless"

Authorization Agreement for Direct Payments (ACH Debits)

Company Name: CASA of Titus, Camp and Morris Counties

I/We _____ hereby authorize CASA of Titus, Camp and Morris Counties, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) ___ Checking Account/ ___ Savings Account (check one) indicated below at the depository financial institution named below, hereinafter called _____ (name of bank), and to debit the same to such account. I/We acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Name _____

Transit/Routing Number _____

Account Number _____

Name(s) on Account _____

Amount debited MONTHLY (please circle one) \$100 \$75 \$50 \$30 \$25 or other \$ _____
Beginning on the 1st or 15th (circle one) of May 2015 and continuing that date each month following.

This authorization is to remain in full force and effect until CASA of Titus, Camp and Morris Counties has received written notification from me (or either of us) of its termination in such time and in such manner as to afford CASA of Titus, Camp and Morris Counties and Guaranty Bond Bank a reasonable opportunity to act on it.

Name (s) _____

Signature _____

Date _____