

SAMPLE AUTHORIZATION FOR DIRECT DEPOSIT AND SPLIT DEPOSIT VIA ACH (ACH CREDIT)

Check all that apply: □ Begin Deposit □ Change Information □ Split among multiple account I have provided information for each of my accounts below.	unts.
I (we) hereby authorize [Company Name] ("COMPANY") to electronically credit my (our) account (a if necessary, to electronically debit my (our) account to correct erroneous credits). I (we) agree that A transactions I (we) authorize comply with all applicable law.	
Account #1	
☐ Checking Account / ☐ Savings Account (select one) at the depository financial institution ("DEPOSITOI named below. Depository Name	,
Depository Name Account Number Account Number Name(s) on the Account	
Amount of credit (i.e., flat amount or percentage)	
Date(s) and/or frequency of credit(s)	
Account #2	
☐ Checking Account / ☐ Savings Account (select one) at the depository financial institution ("DEPOSITOR named below.	RY")
Depository Name	
Depository Name Account Number Account Number	
Name(s) on the Account	
Date(s) and/or frequency of credit(s)	
Account #3	
☐ Checking Account / ☐ Savings Account (select one) at the depository financial institution ("DEPOSITOR named below	RY")
Depository Name	
Depository Name Account Number	
Name(s) on the Account	
Date(s) and/or frequency of credit(s)	
I (we) understand that this authorization will remain in full force and effect until I (we) notify COMP/ [insert manner of revocation, i.e., in writing, by phone, location, address, etc.] that I (we) wish to revoke authorization. I (we) understand that COMPANY requires at least [X days/weeks] prior notice in order cancel this authorization.	this
Name(s):	
(Please Print)	
Date: Signature(s):	