

ACH AUTHORIZATION FORM

CONSUMER AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBIT)

Direct payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment.

I authorize SAN JOAQUIN POWER EMPLOYEES CREDIT UNION (SJPECU) to electronically initiate entries to my account at the financial institution listed below and if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until SJPECU is notified by me in writing to cancel it in such time as to afford SJPECU and the financial institution a reasonable opportunity to act on it.

Check One: NEW ACH FINANCIAL INSTITUTION Name: Address:	***Please Attach Copy of a
Name:	<u>***Please Attach Copy of a</u> <u>Voided Check***</u>
	Please Attach Copy of a Voided Check
	Voided Check***
Audress.	<u>voiaea Check www.</u>
Routing #	Checking/Savings Account #
	1 (1)
These numbers are located on the bottom of your c	
Routing Number Acc	# 56 78 90 1 23 * count Number
CREDIT UNION DISTRIBUTION	
PAYMENT FIXED	
SUFFIX AMOUNT OR AMOUNT	FREQUENCY (Check One)
Savings	Bi-Weekly (every two weeks)
	Bi-Weekly, Skip Last (every two weeks, but will always skip the 3 rd payment in any month having more than two payments)
	Semi-Monthly (twice a month)
	Monthly
	One Time Only
	*DESIRED START DATE:
	*Signed ACH Authorization Form must be received at least 15 days prior to desired start date.
MEMBER INFORMATION	
Member Name (Please Print):	Account #
	Phone #
	E-mail
Member Signature:	Date:
FOR CR	EDIT UNION USE ONLY
Date Received:	Effective Date:
Entered By C	