Authorized Agreement for Direct Payments (ACH Debits)

I (we) hereby authorize Town of Washington hereinafter called COMPANY, to debit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called Washington State Bank, to debit same to such account. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

_____   _____
(Financial Institution Name)   (Branch)

_____   _____   _____   _____
(Address)   (City)   (State)   (Zip)

_____   _____   Type of Acct: [ ] Checking   [ ] Savings
(Routing #)   (Account #)

_____
This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and manner as to afford <u>Town of Washington</u> and <u>Washington State Bank</u> a reasonable opportunity to act on it.

_____   _____
(Print Individual Name)   (Town of Washington Utility Acct #)

_____   _____
(Signature)   (Date)

✓ All written credit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.
✓ Single entry reversals do not require authorization by the receiver. Therefore, previously recommended language regarding the initiation of possible debit entries is no longer stated in the authorization.
✓ The underlined language in the authorization above represents the disclosure requirement associated with the clarification of OFAC economic sanction policies upon ACH Network Participants.

Attach voided check here

Revocation Authorized Agreement for Direct Payments (ACH Debits)

I hereby revoke the above Authorization Agreement noted above this _____ day of _____, 20____

_____   _____
(Print Individual Name)   (Date)

_____   _____
(Signature)   (Town of Washington Signature of Acceptance)