

Western Division Federal Credit Union  
 6750 Main Street • Williamsville, NY 14221  
 Ph: (716) 632-9328 • Fax: (716) 632-1383  
 www.westerndivision.org

## ACH DEBIT AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS

*This form must be accompanied by a cancelled check; deposit slip; or letter on official letterhead from the financial institution from which the funds will be pulled prior to depositing or processing a payment to the Western Division account noted at the bottom of this form.*

I (we) hereby authorize **WESTERN DIVISION FEDERAL CREDIT UNION** to initiate debit entries and to initiate, if necessary, credit entries as adjustments for any debit entries in error to my (our) account indicated below at the depository financial institution named below, hereinafter called **DEPOSITORY**, and to debit and/or credit 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.

Request: <input type="checkbox"/> New <input type="checkbox"/> Change	Frequency: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Semi-monthly	Start Date: _____ Loan Due Date: _____ Amount: \$ _____
---	--	---

Depository Name:		
Address:		
City:	State:	Zip:
<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account		
Account #:	Routing #:	

This authorization is to remain in full force and effect until **Western Division Federal Credit Union** has received written notification from me (or either of us) of its termination in such time and in such manner as to afford **Western Division Federal Credit Union** and **Depository** a reasonable opportunity to act on it.

Name(s): _____ _____	Signature: _____ Date: _____
-------------------------	---------------------------------

**Note:**            Written debit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

Western Division Account to <b>CREDIT</b>	Member #: _____ - _____	Name: _____
--	-------------------------	-------------