

# FEED THE KIDS, INC

## **AUTHORIZATION FOR DIRECT DEPOSIT AND SPLIT DEPOSIT VIA ACH (ACH CREDIT) (APPENDIX F)**

### **CONSUMER AUTHORIZATION FOR DIRECT DEPOSIT VIA ACH (ACH CREDITS)**

Direct Deposit via ACH is the deposit of funds to a consumer's account for payroll, employee expense reimbursement, government benefits, tax and other refunds, and annuities and interest payments.

Check all that apply:  Begin Deposit  Change Information  Split Among Multiple Accounts  
I have provided information for each of my accounts below.

I/We hereby authorize \_\_\_\_\_ ("COMPANY") to electronically credit my/our account (and if necessary, to electronically debit my/our account to correct erroneous credits<sup>1</sup>). I/we agree that ACH transactions I/we authorize comply with all applicable law.

#### **Account #1**

Checking Account OR  Savings Account at the depository financial institution ("DEPOSITORY") named below:  
Depository Name \_\_\_\_\_ Routing Number \_\_\_\_\_  
Account Number \_\_\_\_\_ Name(s) on Account \_\_\_\_\_  
Amount of Credit (i.e. flat amount or %) \_\_\_\_\_ Date(s) &/or frequency of credit(s) \_\_\_\_\_

#### **Account #2**

Checking Account OR  Savings Account at the depository financial institution ("DEPOSITORY") named below:  
Depository Name \_\_\_\_\_ Routing Number \_\_\_\_\_  
Account Number \_\_\_\_\_ Name(s) on Account \_\_\_\_\_  
Amount of Credit (i.e. flat amount or %) \_\_\_\_\_ Date(s) &/or frequency of credit(s) \_\_\_\_\_

#### **Account #3**

Checking Account OR  Savings Account at the depository financial institution ("DEPOSITORY") named below:  
Depository Name \_\_\_\_\_ Routing Number \_\_\_\_\_  
Account Number \_\_\_\_\_ Name(s) on Account \_\_\_\_\_  
Amount of Credit (i.e. flat amount or %) \_\_\_\_\_ Date(s) &/or frequency of credit(s) \_\_\_\_\_

I/We understand that this authorization will remain in full force and effect until I/we notify COMPANY [insert manner of revocation, i.e., in writing, by phone, location, address, etc.] that I/we wish to revoke this authorization. I/We understand that COMPANY requires at least [X days/weeks] prior notice in order to cancel this authorization<sup>2</sup>.

Name(s) (Please print) \_\_\_\_\_

Date \_\_\_\_\_ Signature(s) \_\_\_\_\_

<sup>1</sup> The NACHA Operating Rules do not require the consumer's express authorization to initiate Reversing Entries to correct erroneous transactions. However, Originators should consider obtaining express authorization of debits or credits to correct errors.

<sup>2</sup> Written credit authorizations must provide that the Receiver may revoke the authorization only by notifying the Originator in the time and manner stated in the authorization. The references to notification should be filled with a statement of the time and manner that notification must be given in order to provide company a reasonable opportunity to act on it (e.g., "in writing by mail to 100 Main Street, Anytown, NY that is received at least three (3) days prior to the proposed effective date of the termination of authorization").