ACH Origination Authorization Agreement

Internal Use Only: Agreement Prepared By



I (We) hereby authorize Andrews Federal CU to initiate/set up or stop the ACH draft to/from my designated financial institution as I have indicated below. I (We) acknowledge that ACH transactions to/from my (our) account must comply with the provisions of US law and standard ACH guidelines. Recurring authorizations are to remain in full force and effect until Andrews Federal CU has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Andrews Federal CU a reasonable opportunity to act on it.

Note: Requests must be made no less than 3 business days prior to the expected payment/transfer date, allowing us

| adequate time for processing the request. | - |
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| Account Number Account Name | |
| I (WE) WISH TO SET UP THE FOLLOWING ACH SERVICE(S) FOR MY ACCOUNT: One Time Entry (In Person Request) You request us to send a transfer to/from your other financial institution in the amount specified and date indicated below. This transfer will only occur once, as specified. | cated |
| Transfer Date: Amount: \$ Send: □ To □ From my Outside Financial Institution Indicate the Andrews share ID to deposit to/withdraw from: | |
| ACH RECURRING DEPOSIT/WITHDRAWAL AUTHORIZATION ☐ You request us to send or receive a specific dollar amount to/from your other financial institution at a particula frequency, beginning on the 1st Transfer Date indicated below. This transfer will continue to recur until you notify writing to stop it. | |
| Transfer Date: Amount: \$ Send: ☐ To ☐ From my Outside Financial Institution Indicate the Andrews share ID to deposit/withdraw from: | |
| LOAN PAYMENT AUTHORIZATION ☐ You request us to withdraw your Andrews Federal loan payment amount every payment period from your Outsi Financial Institution, beginning on the 1st Transfer Date indicated below. This transfer will continue to recur until y us in writing to stop it. | |
| 1st Transfer Date:Loan Due Date: Loan ID:Payment Amount: \$ Payment Frequency: | |
| STOP AN EXISTING AUTHORIZATION You wish to STOP the ACH Origination that you previously authorized through Andrews Federal. The next schedule for the payment/transfer you wish to stop is: Origination Amount: \$ Frequency: | uled date |
| OUTSIDE ACCOUNT INFORMATION: Financial Institution Name: Acct No Routing Number: Acct No Type: □ Savings □ Checking | |
| IMPORTANT NOTE: Before your new ACH can be set up, you must provide proof of ownership of your Outside Financial Institutio A "VOIDED" check is required for a checking account. For a savings account, verification from your other institution is required (statement or a letter from your institution showing ownership). (This proof of ownership is not required for One Time Entry required in person). | i.e. a bank |
| ACH Transfers: You agree to be bound by Automated Clearing House Association rules. These rules provide, among other things, payments made to you, or originated by you, are provisional until final settlement is made through a Federal Reserve Bank or payotherwise made as provided in Article 4A 403(a) of the Uniform Commercial Code. If we do not receive such, we are entitled to from you in the amount credited to your account and the party originating such payment will not be considered to have the amount credited. If we receive a credit to an account you have with us by wire or ACH, we are not required to give you any notice of payor credit. Andrews Federal reserves the right to revoke this service, or to stop, revoke, or otherwise refuse payment of any ACH transaction, at any time and within its sole discretion; if we choose to do so, we will notify you in regards to any affected transaction. | nyment is a refund ount so oment order origination |
| SignatureDate | |
| The form can be sent via email (ACH@ANDREWSFCU.ORG), fax (301.702.5321), or U.S. mail. Additionally, the form must be accompanied by either a canceled check or bank statement (both must show that the Andrews Member is the owner of the external account). | The codes indical, based to at least 100 and basis 100 per la 11 day and code of the folded find NGC UA Code of the folded find NGC UA Code of the folded find NGC UA Code of the folded find Code of the folded find the fold |

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