



ACH Debit Authorization

I (we) hereby authorize Ozark Federal Credit Union to initiate debit entries in the amount of

\$_____ to my (our) account indicated below and credit the financial institution named below,

hereinafter called FINANCIAL INSTITUTION, to debit the same to such account for loan payment.

I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law. I (we) understand that the payment request must be received at least ten (10) days before a scheduled payment to give the Financial Institution reasonable time to act upon it.

DEBIT ACCOUNT:

(Financial Institution)	(Branch, if needed)		
(Address)	(City)	(State)	(Zip)
- - (Routing number)	(Account number)	(Acct type: savings/checking)	

CREDIT ACCOUNT AT OFCU: _____ - _____
(Account #) (Loan suffix)

Starting Date _____ Frequency (weekly, bi-weekly, monthly) _____

Replacing existing ACH? Yes _____ No _____

MORTGAGE PAYMENTS MUST BE MONTHLY.

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

(print individual name)

(signature)

(date)

(employee accepting form)