



Authorization Agreement For Automation Deposits (ACH Credits)

Company Name: FRAMAX

Company ID: FRAMAX

I hereby authorize FRAMAX to initiate credit entries, and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to my () **Checking** () **Saving** (select one) account indicated below, hereinafter called DEPOSITORY, to credit or debit the same such account. FRAMAX will make reasonable efforts to notify the provider in advance of making a debit or an adjustment to the amount credited to their account.

Bank/Credit Union Name: _____

Branch Address: _____

Routing Number: _____ Account Number: _____

Note: Reviewing the sample check below can help you determine the location of the Routing and Account number on your own check.

To ensure accuracy of banking information the provider must attach a *VOIDED* check to the bottom of this authorization.

This authorization is to remain in full force and effect until FRAMAX has received written notice from the person whose Name and Signature appear below of its termination in such a time and such a manner as to afford FRAMAX and DEPOSITORY a reasonable time to act.

The provider understands that if they close the account to which FRAMAX has been authorized to make a direct deposit, and have not provided sufficient notice of that fact to FRAMAX, that their CACFP meal reimbursement payment will be delayed.

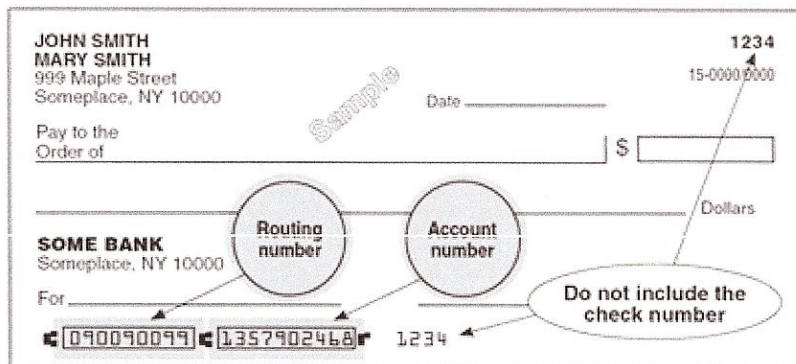
The provider understands that they are responsible to ensure that there is sufficient funds in their account to cover all checks or debits they authorize against the account. FRAMAX is not responsible for any and all fees and service charges incurred by the provider in the case of insufficient funds to cover check, debit, automatic payment, etc. withdrawals made to their account.

Providers Name (PRINT): _____ Provider CACFP Number: _____

Signature: _____ Date: _____

Attach your voided check here

Sample check



Note: The routing and account numbers may appear in different places on your check.