Electronic Funds Transfer (EFT)
Agent Preauthorized Payment Agreement

This agreement is dated this_____ day of _____, 20____, and is by and between_____
(hereinafter called Company) and AFCO Credit Corporation/AFCO Acceptance Corporation/Prime Rate (hereinafter called AFCO).

Agency Name_____
Account #_____**Credit (Deposit/Put in account)**
Account # _____**Debit (Withdraw/Take out)**
Bank Name &Transit Number: _____
Savings ☐ **Checking** ☐
Email address to be used for notification of Debit/Credit Transaction: _____

AUTHORIZATION AGREEMENT FOR ACH DEPOSITS

Company hereby authorizes AFCO or its designee, to initiate credit/debit entries for deposit credits (and/or corrections to the previous credit) to the checking/savings account indicated above at the depository named above, hereinafter called DEPOSITORY, and to credit and/or debit to such account. This authority is to remain in full force and effect until AFCO and DEPOSITORY have received written notification from the above Company of its termination; 10 days post notification in such time and in such manner as to afford AFCO and DEPOSITORY a reasonable opportunity to act upon it.

REQUIRED: ATTACH A VOIDED CHECK HERE FOR ACH FUNDING

Agreed and accepted by Company. The person signing on behalf of Company has the requisite authority to bind Company to the terms of this agreement.

By: _____

Signature: _____

_____
Print Name

_____

Revised 1/13/2012
AFCO 900-01C