

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS  
(Automatic Clearing House ACH DEBITS)

Company Name: NEIGHBORS HELPING NEIGHBORS (NHN) food pantry

I (we) hereby authorize Neighbors Helping Neighbors (NHN) food pantry, herein after called NHN, to initiate debit entries to debit from my/our (check one) \_\_\_ Checking Account, \_\_\_ Savings Account monthly the following amount \$\_\_\_\_\_ from the financial institution and that the transactions must comply with the provisions of U. S. Law.

Financial Institution: \_\_\_\_\_

Branch City: \_\_\_\_\_ State: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

This authorization is to remain in full force and effect until Neighbors Helping Neighbors receives written notification from me (or either of us) of its termination in such time and in such manner as to afford NHN and Alliant Bank, Boonville, MO. Reasonable opportunity to act on it.

Name(s) \_\_\_\_\_  
(Please Print)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date: \_\_\_\_\_ Phone No: \_\_\_\_\_

Signature: \_\_\_\_\_

**NOTE: WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.**

NHN plans to recognize churches, businesses and groups who have members participate. Your name and amount **WILL NOT** be disclosed.

NHN may periodically do a news story. (For example: 23 of 40 Kiwanis members have signed up in the food pantry direct deposit program.)