



**ACH AUTHORIZATION AGREEMENT**

I \_\_\_\_\_ (Print Name) hereby authorize Guardian Credit Union, to initiate ACH entries to my account(s) as indicated below. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. Law.

**Amount \$** \_\_\_\_\_ **Date of First ACH Draft** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Frequency** (Check One)

- One Time Draft      Date of Draft \_\_\_\_\_
- Monthly              Day of the Month (1-31) \_\_\_\_\_
- Bi-Monthly          Days of the Month (1-31) \_\_\_\_\_,
- Weekly                Day of the Week (M-F) \_\_\_\_\_
- Bi-Weekly            Days of the Week (M-F) \_\_\_\_\_,
- Other: \_\_\_\_\_

**Please Debit(-) my account at** (Check One)

- Guardian Credit Union Account number: \_\_\_\_\_ Checking Savings
- Financial Institution Below
  - Name: \_\_\_\_\_
  - Address: \_\_\_\_\_
  - Routing Number: \_\_\_\_ \_
  - Account number: \_\_\_\_\_ Checking Savings

**Please Credit(+) my account at** (Check One)

- Guardian Credit Union Account Number: \_\_\_\_\_ Checking Savings  
Further Credit to Loan Number: \_\_\_\_\_ Type of Loan \_\_\_\_\_
- Financial Institution Below (Will post to account on the third business day following the debit draft settlement)
  - Name: \_\_\_\_\_
  - Address: \_\_\_\_\_
  - Routing Number: \_\_\_\_ \_
  - Account number: \_\_\_\_\_ Checking Savings Loan

This authority is to remain in full force and effect until Guardian Credit Union has received written notification from me (or either of us) of its termination in such time and manner as to afford Guardian Credit Union and other Financial Institution a reasonable opportunity to act on it. Guardian Credit Union is not responsible for any incorrect information given in this request. Any incorrect information given by you may result in the ACH Credit being delayed or not being processed. Credit entries to other financial institutions will settle on the third business day following the debit draft settlement at Guardian Credit Union. All drafts intended to settle on a non banking day (defined by the Federal Reserve Bank) will be settled the proceeding banking day. The undersigned hereby releases Guardian Credit Union from all liability from any loss unless the loss arises out of our failure to exercise ordinary care, failure to act in good faith, or failure to act in accordance with written instructions given you in this document.

Sign \_\_\_\_\_ Date \_\_\_\_\_

**Please fax back to Guardian Credit Union at 334-244-5099 or mail to: P.O. Box 3199, Montgomery, AL 36109. If you have any questions, please call our Accounting Department at 1-800-239-7366.**

**Sign Below to Revoke Authorization**

**Please sign below or attach written notice to revoke authorization of the ACH drafts on these accounts.**  
By signing this, Guardian Credit Union no longer has authorization to draft the accounts listed above.

Sign \_\_\_\_\_ Date \_\_\_\_\_