



# SRI Federal Credit Union

## AUTOMATIC PAYMENT AUTHORIZATION

I hereby authorize SRI Federal Credit Union, hereinafter called CREDIT UNION, to initiate an ACH entries to my (our) account indicated below and the financial institution below, hereafter called FINANCIAL INSTITUTION. I (we) acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

### ORIGINATING CREDIT UNION INFORMATION:

SRI FCU ACCOUNT NUMBER: \_\_\_\_\_

STARTING DATE \_\_\_\_\_ FREQUENCY \_\_\_\_\_

DOLLAR AMOUNT REQUESTED: \$ \_\_\_\_\_

TRANSACTION TYPE (CHECK ONE): **Credit** (To SRI FCU)                      **Debit** (From SRI FCU)

ACCOUNT TYPE (CHECK ONE): **Checking**                      **Savings**                      **Loan Payment**                      Loan # \_\_\_\_\_

IF GOING TO OTHER INSTITUTION:  
FURTHER CREDIT TO ACCOUNT \_\_\_\_\_ LOAN \_\_\_\_\_

### RECEIVING FINANCIAL INSTITUTION INFORMATION:

FINANCIAL INSTITUTION: \_\_\_\_\_

ROUTING NUMBER: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

ACCOUNT TYPE (CHECK ONE): **Checking**                      **Savings**

ACCOUNT HOLDER NAME: \_\_\_\_\_  
(Joint Account Only)

ADDRESS: \_\_\_\_\_

CITY / STATE / ZIP: \_\_\_\_\_

This authorization is to remain in full and effect until CREDIT UNION has received written notification from me of its termination in such time and manner as to afford CREDIT UNION and FINANCIAL INSTITUTION a reasonable opportunity to act on it. This authorization may be unilaterally terminated by the CREDIT UNION in cases of excessive returns or member abuse, or whenever any loans have been paid in full with recurring debits.

PRINT INDIVIDUAL NAME: \_\_\_\_\_  
(Joint Account Only)

PRINT MEMBER NUMBER: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
(Joint Account Only)

DATE: \_\_\_\_\_

\*\*\*\* Please attach copy of voided check to this form\*\*\*\*

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