



Authorization for Direct Payments

Name: _____ GTFCU Account#: _____

Phone Number: _____

I hereby authorize Greater Texas Federal Credit Union to initiate DEBIT entries to my
Checking Savings

I would like my payment drafted from the account at the financial institution indicated below in the
amount of \$ _____. I would like these drafts to begin on _____, 20_____.

Form can be faxed to (512) 458-5853 or emailed to InfoACH@gtfcu.org

Financial Institution: _____ Name on Account: _____
Routing Number: _____ Account Number: _____
(Must be 9 digits)

Statements

I (the undersigned) understand that if the ACH Origination item is returned for NSF, Uncollected Funds, Stop Payment
or Account Closed, a \$26.00 ACH return fee will be charged to my (our) account and the loan payment will be
reversed. After THREE returned items the ACH Origination item will be canceled.

I (the undersigned) understand that this electronic debit will be activated within 30 days of receipt. Therefore, my
first payment may need to be made manually. (Please contact the loan department with questions)

I (the undersigned) understand that this authority is to remain in full force and effect until GTFCU has received
written notification from me of its termination within five (5) business days prior to next scheduled payment. Such
written cancellation notice should be sent to the address below, or faxed.

Rights and Liabilities

Your rights and responsibilities under the law are outlined in the Federal Reserve Board's Regulation E that governs
a variety of electronic transactions. In general, you are protected from loss providing you are responsible in reading
your account statements and reporting problems and errors promptly. You were provided with a Regulation E
disclosure when you opened your account with us.

If we do not complete a transaction to or from your accounts on time or in the correct amount according to our
agreement with you, we will be liable for your losses or damages. However, there are some exceptions. We will
NOT be liable for the following:

- Through no fault of ours, you do not have enough money in your account to make the transaction.
• The money in your account is subject to an uncollected funds hold, legal process or any other encumbrance
or agreement restricting a transaction.
• If you do not have sufficient funds available through overdraft protection.
• If circumstances beyond our control (such as fire or flood) prevent the payment or transfer despite
reasonable precautions that we have taken.

Member Signature: _____ Date: _____

Accounting Use Only

Processed by: _____ Date: _____