



## ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM

As a duly authorized check signer on the financial institution account identified below, I authorize Country Partners Cooperative of Gothenburg, NE to debit my bank account identified below on the 15<sup>th</sup> of each month for statement balance for the preceding month on the following Country Partners Cooperative account (s)

\_\_\_\_\_

Furthermore, if any such electronic debit(s) should be returned by my financial institution as Non-Sufficient Funds ( NSF ), I authorize, Country Partners Cooperative, to collect a returned item fee of \$20.00 per item by electronic debit from my account identified below.

For accounting purposes, all electronic debits will be reflected in the monthly bank statement that corresponds with the financial institution account identified below.

This agreement shall continue in effect unless and until terminated by either Country Partners Cooperative or the customer by written notice to the other party.

I understand and authorize all of the above as evidenced by my signature below.

AUTHORIZING SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Financial Institution account “identifying information”:**

Enter financial institution account information into the fields provided below or attach a blank VOIDED check.

Complete or attach Blank VOID Check here.	<b>Financial institution:</b>	<b>Branch:</b>	
	<b>City:</b>	<b>State:</b>	<b>ZIP CODE:</b>
	<b>Transit/ABA #</b>	<b>Account #</b>	

**Example**

**Financial Institution**

510 Money St.  
Anycity, ST. 00000

00001

John Doe  
123 Street  
Anycity, ST. 00000

Date \_\_\_\_\_

Pay to the  
Order of \_\_\_\_\_ \$ \_\_\_\_\_

Dollars

Memo \_\_\_\_\_

\* XXXXXXXXX \* 0000 0000 000000 \*

This is the 9 digit Transit / ABA Bank Routing number.

The Account number is usually to the right of the Routing number. Some Financial Institutions add the check number between the Routing and Account numbers