

Complete and return to GSCB Finance department.

Service Unit #: \_\_\_\_\_ Troop #: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Name on Account: \_\_\_\_\_

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

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

Troop hereby authorizes Girl Scouts of the Chesapeake Bay to initiate an ACH Debit/Credit to Troop \_\_\_\_\_ bank account at the financial institution listed above, and, if necessary, initiate any ACH Debit/Credit adjustments for any transactions debited/credited in error.

Troop acknowledges and agrees to:

1. I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify GSCB in writing of any changes in my account information.
2. Troop is responsible for depositing sufficient funds to cover the ACH Debit at least five days before the posted date of ACH withdrawals.
3. In the case of an ACH transaction being rejected for Non-Sufficient Funds (NSF), I understand that GSCB may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$30 charge for each attempt returned NSF.
4. Troop agrees to inform GSCB five days prior to **each** of the ACH Debits if they have insufficient funds to cover the total amount due at that time. If the troop does not notify GSCB, it will result in fees assessed to the troop account due to insufficient funds.
5. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I agree not to dispute this recurring billing with my bank so long as the transactions correspond to the terms indicated in this authorization form.

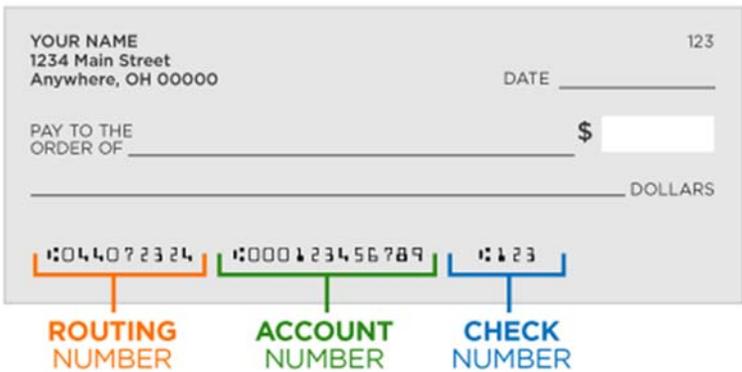
**This authorization must be signed by an authorized check signer for the troop.** Pursuant/troop agrees upon above procedures prior to the ACH debit/credit with this authorized signature:

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

Print Name: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Attach VOIDED troop check here.



The diagram shows a check with the following fields and labels:

- YOUR NAME:** 1234 Main Street, Anywhere, OH 00000
- DATE:** \_\_\_\_\_
- PAY TO THE ORDER OF:** \_\_\_\_\_
- \$:** \_\_\_\_\_
- DOLLARS:** \_\_\_\_\_
- ROUTING NUMBER:** 0044072324
- ACCOUNT NUMBER:** 000123456789
- CHECK NUMBER:** 123