



Consumer Authorization For Direct Payment via ACH (ACH Debit)

Schedule your payment to be automatically deducted from your checking or savings account at any financial institution. Just complete and sign this form to get started!

Recurring Payments Will Make Your Life Easier:

- It's convenient, saving you time and postage.
- Your payment is always on time, eliminating late charges

Here's How Recurring Payments Work:

You authorize regularly scheduled deductions each billing period from your checking or savings account identified below. The deduction will appear on your account statement as an "ACH Debit." You agree that no prior-notification will be provided unless Freedom changes the date or payment amount, in which case you will receive notice from us at least seven (7) days prior to the payment being collected.

Please complete the information below:

I, _____, member number _____, authorize Freedom Federal Credit Union to electronically debit my bank account indicated below, in the amount of \$_____, on a _____ (frequency) basis, for payment of my _____ (loan type) loan number _____, beginning on due date _____ and continuing until terminated as hereinafter set forth or until my loan is paid in full.

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Account Type: Checking Savings

Name on Acct _____

Bank Name _____

Account Number _____

Bank Routing # _____

Bank City/State _____



SIGNATURE _____

DATE _____

I understand that this authorization will remain in full force and effect until I notify Freedom Federal Credit Union in writing at least three (3) business days prior to the proposed date of the termination of this authorization by faxing to 410-676-6381, or by mailing to: Freedom Federal Credit Union, P.O. Box 1545, Bel Air, MD 21014. I also agree to notify Freedom in writing of any changes in my account information at least 15 days prior to the next billing date. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that Freedom may, at its discretion, attempt to process the charge again up to two (2) times within 30 days, and agree to any additional charges for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment (for specific charges please refer to Freedom's schedule of service charges). I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Duplicate original – one held by the member and one held by Freedom.