IMPORTANT! Please be sure to attach a voided check for a checking account or a deposit slip for a savings account used for the ACH debit transactions.

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Company Name: The Village of Gambier Company ID Number: 31-0797524 I (we) hereby authorize The Village of Gambier, hereinafter called COMPANY, to initiate debit entries to my (our) Checking/ Savings (select on) indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law. Depository Bank Name: Routing Number: Account Number: _____ This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. Recipient Name(s): Return this with a voided check or deposit slip By Mail: Village of Gambier 115 Meadow Lane PO Box 1984 Gambier, OH 43022

By Email: utilityclerk@villageofgambier.org

Note: Retain for at least two years after termination of last originated entry.