



# AMEEN Housing Co-operative of California Inc.

*Investing in the Community*

## AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDIT) {Withdrawal from Ameen}

**\*Please attach copy of Driver's License and Voided Check with form**

Member's Full Name: \_\_\_\_\_  
(First) (Middle) (Last)

Members - Ameen Housing ACCOUNT NUMBER \_\_\_\_\_ (all 8 digits)

I hereby authorize Ameen Housing Cooperative of California Inc, to initiate credits indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to credit 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.

Entries to my (our)  Checking /  Savings account (select one)

Withdrawal Amount: \$ \_\_\_\_\_  One time Only

Name of Your Bank (Full Name Please): \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_ (Please Enter Full Number)  
*\*Routing number should match the attached Voided Check*

Account No: \_\_\_\_\_ (Please Enter Full Number)  
*\*Account number should match the attached Voided Check*

This authorization is to remain in full force and effect until Ameen Housing has received written notification from me (or either of us) of its termination in such manner as to afford Ameen Housing and DEPOSITORY a reasonable opportunity to act on it. **\*Please affix a VOID CHECK and Copy of DL on page # 2**

NAME (S) \_\_\_\_\_  
(Please Print)

DL NUMBER \_\_\_\_\_

DATE \_\_\_\_\_ SIGNED X \_\_\_\_\_

SIGNED X \_\_\_\_\_

**NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.**

**Please affix a VOID CHECK**

**Please affix your DL**