AUTOMATIC DEBIT AUTHORIZATION

I authorize Texas A&M University (TAMU) and its successo checking or savings account indicated below and I authorize to these entries from my account. This authority shall remain in and BANK have received notification from me of its termination and BANK a reasonable opportunity to act on it, or until my lo has sent me ten (10) days written notice of TAMU's or BANK's authorization to debit my account, I will notify TAMU and BAN termination. I understand that TAMU will notify me of any ch acknowledge that some or all of the below referenced information University to process the electronic debit transaction. I under TAMU account for any attempt to debit that is rejected by my	the financial institution ("BANK" effect until the earlier of the for on in such time and in such mar ban account has been paid in fu s termination. If I choose to ter IK in writing and will allow ten (anges in the dollar amount deb ation may be released to the bar stand that a returned item fee) named below to debit ollowing dates; TAMU oner as to afford TAMU II, or until TAMU or BANK rminate this (10) days to process the bited from my account. I onk used by Texas A&M
New ACH Changed ACH Month ACH is to Si	tartToday's Date	2
*For new & changed ACH, <u>complete form along with yeaccount numbers.</u> **If received in our office on or before the 9 th of the me number on the 10 th of the month. We will then be able later on the 15 th . (Example: form received May 9 th , ABA/routing	onth, we will pre-note (test) to debit your account for th	your ABA/routing le first time 5 days
Customer Information		
Customer Universal Identification Number/UIN	ow or have a UIN please call (9	079) 845-8023).
Customer Name		
Customer Current Address: (Street)		
(Town)	(State)	(Zip Code)
Customer E-mail	Phone number ()
Bank Account Information Name of Financial Institution		
Type of Financial Institution (check one) () Bank	() Savings and Loan	() Credit Union
Bank Routing Number	Account Number	
Type of Account (check one)	() Checking	() Savings
Account Holder Name (If different from "Customer")		

Monthly Debit Information

Amount to be debited on the fifteenth (15th) of each month____

* If you have additional loans that enter repayment at a future date, this amount may increase. We will notify you prior to any increases being made to the debit amount.

Billing and Address Information

I understand that I will receive an account statement once a year and will not receive a monthly billing statement. I am responsible for notifying Student Business Services at (979)845-8023 or e-mail <u>loans@tamu.edu</u>) of any address or name changes.

Signatures

Customer Signature____

6001 TAMU

Account Holder Signature (If <u>different</u> from "customer") ______ Mail to: TAMU Business Services

or Fax to: (979) 845-8126

College Station, Texas 77843-6001

*To terminate your ACH agreement email: <u>loans@tamu.edu</u> requesting ACH to be cancelled. Include UIN in the email.