## AUTOMATIC DRAFT AUTHORIZATION FOR East Texas Media Association (dba KBJS)

This is to authorize **KBJS 90.3 FM** to automatically debit my account as follows:

Routing Number \_\_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_

Bank account # \_\_\_\_\_

Name of Financial Institution \_\_\_\_\_

Financial Institution City, State

(The Routing Number is the 9 Digit Number located at the far left in the series of numbers printed on the bottom your check or deposit slip. Your account number is the middle series of printed numbers )

I authorize a monthly draft in the amount of \$	to be withdrawn on or about the 18 <sup>th</sup>
of each month beginning	(month/year).

I understand that this authorization will be in effect until I notify my financial institution in writing that I will no longer desire this service, allowing reasonable time to act on the notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account. I have the right to stop payment of a debit entry by notifying my institution before my account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by my financial institution if, within fifteen (15) calendar days following the date on which I was sent a statement of account or a written notice of such entry or forty-five (45) days after posting, whichever comes first, I give my financial institution a written notice identifying the entry. stating that it is in error and requesting credit back to my account.

## THIS AUTHORIZATION IS NON-NEGOTIABLE AND NON-TRANSFERABLE

 X\_\_\_\_\_
 X\_\_\_\_\_
 Date\_\_\_\_\_

 Print Customer Name
 Authorized signature on account
 Date\_\_\_\_\_

## PLEASE INCLUDE YOUR EMAIL ADDRESS:

## PLEASE INCLUDE A VOIDED CHECK or SAVINGS ACCOUNT DEPOSIT SLIP