

Alpha Omega

Authorization For Electronic Funds Transfer Payments

I hereby authorize Alpha Omega, to initiate debit/credit entries to my account for all payments due, including any returned unpaid item fees due, regarding the subject of this agreement and the Financial Institution at which my account is held to debit/credit the same to such account. This authority is to remain in full force and effect until (your company), and the subject Financial Institution have received written notification from me of its termination in such time and in such manner as to afford (your company), and the Financial Institution a reasonable opportunity to act on it. I understand that I may cancel this authorization by providing written notice to Alpha Omega, at least three (3) business days prior to the payment due date. I further understand that canceling my authorization does not relieve me of the responsibility of paying all amounts due in full.

Agreement #: _____ TL101 _____

Signature: _____

Name Printed: _____ Calvin Brazier _____ **Date:** _____

Bank Account:

Bank Name: _____ Regions _____

Routing No.: _____

Account No.: _____

Do Not Send Payments To This Address

Installment Loan Act of 1959, Section 58-7-1 to 58-7-9, NMSA

**Re-Presented Check Notification/NSF Fee
Authorization**

I understand if this check is returned unpaid it may be electronically re-presented and I authorize the Payee to debit a fee of \$20.00.

(sign) _____

To revoke fee authorization call:.