

# CMS and ACH Agreement

Farm Bureau Bank

Company Name: **Lions Futball Club**

Coach: \_\_\_\_\_

Player Name: \_\_\_\_\_

Team: \_\_\_\_\_

I (we) authorize the Lions Futball Club, Inc., hereinafter called COMPANY, to initiate debit entries to my (our) checking/savings (circle one) account indicated at the depository financial institution named below. 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 afforded COMPANY reasonable opportunity act on it.

Please check one:                       NEW ACH SET UP                       CHANGE EXISTING ACH SETUP

Select One Option:

**Recurring transfer:** Transfer \$ \_\_\_\_\_ From the account listed below monthly on the 1st day of each month.

**Other:** \_\_\_\_\_  
\_\_\_\_\_

## DEPOSITORY INFORMATION

Name of Institution: \_\_\_\_\_

City, State: \_\_\_\_\_

Institution ABA/Routing Transit Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

\_\_\_\_\_  
Customer Name (Please Print)                      Customer Signature                      Date

\_\_\_\_\_  
Customer Name (Please Print)                      Customer Signature                      Date

***ATTACH VOIDED CHECK HERE***