



**AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWALS  
(ACH Debits)**

Membership Name(s) \_\_\_\_\_

Social Security No(s) \_\_\_\_\_

Telephone No(s) \_\_\_\_\_

I/We hereby authorize Hill Country Telephone Cooperative, Inc. hereinafter called COOPERATIVE, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my/our  checking  savings account (*select one*) indicated below and the depository/bank named below, hereafter called DEPOSITORY, to debit and/or credit the same to such account.

DEPOSITORY \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Transmit: ABA No. \_\_\_\_\_ Account No. \_\_\_\_\_

This authority is to remain in full force and effect until COOPERATIVE has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COOPERATIVE and DEPOSITORY a reasonable opportunity to take action.

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date

(A voided check must be attached here for account verification.)