



Citizens Bank of Cumberland County

P. O. Box 810 - 209 Keen Street
Burkesville, Kentucky 42717
Ph: (270) 864-2323 - Fax: (270) 864-9493

Authorization Agreement Direct Payments (ACH Debits)

I (we) authorize **City Of Burkesville**, hereinafter to debit entries to my (our) account indicated below and the Financial Institution named below hereinafter to debit it to such account. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Financial Institution Name	Branch	
Date to Begin	Amount	
Address	City & State	zip
Routing/transit number	Account	Type

This authority is to remain in full force and effect until **City Of Burkesville** has received written notification from me (or either of us) of its termination in such time and manner as to afford **City Of Burkesville** and **Citizens Bank Of Cumberland County** a reasonable opportunity to act on it.

Print Name	Signature
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Please attach copy of voided check to this form