



Date: _____

AUTHORIZATION FOR DIRECT PAYMENT via ACH (ACH DEBIT)

I/we authorize **Texas National Bank** to electronically debit my/our account (and, if necessary, electronically credit my/our account to correct erroneous debits) as follows:

Account type: (check one) checking savings

Name on the account: _____

Bank name: _____

Routing Number: _____

Account: _____

Amount of debit(s):\$_____ If applicable, payment may fluctuate due to Escrow, Lines of Credit, or incurred fee's
For Loan Number: _____

Date (s) _____ and/ or frequency of debit (s) each (month, week, etc.) _____

OPTIONAL: Debit an additional \$_____ each month to be applied as a principal reduction

Auto Pay Last Payment / Balloon _____ Yes _____ No

This authorization will remain in full force and effect until **Texas National Bank** has received a written notification by email or text from you of its termination and must be received at least 3 business days prior to the scheduled payment. To revoke this authorization, Call or Write to:

Texas National Bank
P.O. Box 4650
Edinburg, TX 78540
956-217-7101

Account holder authorizes **Texas National Bank** to initiate debit entries to their account at the Receiving Depository Financial Institution (RDFI) and to debit the same to such account. Account holder acknowledges that the origination of ACH transactions to the account must comply with the provisions of US. Law.

Signature

Date

Signature

Date