



PO Box 70 • 109 N HICKORY ST • MOUNT VERNON, MO • PHONE (417) 466-2122

ODFI – Originator Agreement: Simmons Bank Internet Banking System, ACH

AUTHORIZATION AGREEMENT FOR ACH DEDUCTION

Please complete the information below:

I _____ hereby authorize the City of Mount Vernon to initiate debit entries to my account indicated below, at the depository financial institution named below, and to debit the same to such account. I acknowledge that the origination of the ACH transactions to my account must comply with the provisions of U.S. law.

Account Address: _____

Account Number: _____

Checking

Savings

Bank Name: _____

Routing Number: _____

Account Number: _____

Bank City, State: _____



Preferred Transaction Date: ___1st ___5th ___10th ___15th

Email Address: _____

Signature: _____

Date: _____

Note: ALL WRITTEN CREDIT AUTHORIZATION MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.