

# ACH CREDIT/DEBIT TRANSACTION AUTHORIZATION



## PERSONAL INFORMATION

Full Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## FINANCIAL INSTITUTION ACCOUNT INFORMATION

I authorize you and the financial institution listed below to initiate electronic credit or debit entries and adjustments for any credit or debit entries in error to my:

Checking Account       Savings Account

This authority will remain in effect until I have canceled with Busey Bank in writing.

Financial Institution: \_\_\_\_\_

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

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## BUSEY ACCOUNT INFORMATION

Transit (ABA) Routing Number: \_\_\_\_\_

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