



Recurring ACH Payment Authorization

You authorize regularly scheduled charges to your checking/savings account. You will be charged the amount indicated below each billing period. The charge will appear on your bank statement as an "ACH Debit". You agree that no prior-notification will be provided once this recurring donation is established.

I _____ authorize **North Olympic Land Trust** to charge my
(Full Name)
bank account indicated below for a donation of \$ _____ on or before the
10th of each month. (Amount \$)

Billing Information

Billing Address _____ Phone # _____

City, State, Zip _____ Email _____

Bank Details

Checking Savings

Account Name _____

Bank Name _____

Account Number _____

Routing Number _____



I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify **North Olympic Land Trust** in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next transaction date. If the above noted charge dates fall on a weekend or holiday, I understand that the charges may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF) I understand that **North Olympic Land Trust** may at its discretion attempt to process the charge again within 30 days. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this bank account and will not dispute these scheduled transactions with my bank; so long as the transactions correspond to the terms indicated in this authorization form.

SIGNATURE _____
(Account Holder's Signature)

DATE _____

Please mail or drop off this authorization to North Olympic Land Trust:

Mailing: PO Box 2945
Office: 602 East Front
Port Angeles, WA 98362