

**AUTHORIZATION AGREEMENT
DIRECT PAYMENTS (ACH DEBITS)**

I (we) hereby authorize Beyond26 (501c3 tax ID 82-4828983), hereinafter called the Company, to debit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called the Financial Institution. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

(Financial Institution)

(City)

(State)

(Routing Number)

(Account Number)

Checking Savings



I (we) authorize the Company to debit my (our) account in the amount of \$_____, and to occur, One Time Weekly Bi-Weekly Monthly, beginning _____ . This authorization, if recurring, is to remain in full force and effect until the Company has received written notification from me (or either of us) of its termination in such time and manner as to afford the Company and the Financial Institution a reasonable opportunity to act on it.

(Print Individual Name)

(Phone Number)

(Signature)

(Date)