## Automated Payments (ACH) Customer Authorization Form

For your convenience, and with the help of your bank, we can now automatically deduct your quarterly payment from your checking account. Simply complete the information below and attach a voided check. Return this information to:

## Wellesley Students' Aid Society, 106 Central Street, Schneider 117, Wellesley, MA 02481-8203

Name			
Address	City	State	Zip Code
Phone Number	E-Mail Address		

## **Banking Information**

Bank Name	Name on the Account
Bank Routing Number (see example below)	Bank Account Number (see example below)

## PLEASE ATTACH A VOIDED CHECK TO THIS FORM

Signature

					- Check Number
		DATE			- 1948
PAY TO THE ORDER OF	4	DATE _		\$	DOLLARS
мемо	and the second s	RESULTION OF THE RESULT		mmmill	DOLEANS
-	1 1015	234667	8:		
Routing & Numb		Account Number			

Date

I hereby authorize a quarterly ACH (Automated Clearing House) electronic debit from the account designated above to be paid to Wellesley Students' Aid Society, Inc., in payment for owed tuition loan principal, interest, and incurred fees (if applicable) not to exceed the amount agreed to by me below.

This authorization is to remain in full force and effect until such time that my indebtedness is fully satisfied. The specific debit to my account authorized herein may only post on or after the debit date(s) listed below, and in no event may the debit transaction post to my account prior to said date(s). I may only revoke this authorization by contacting WSAS in writing at the address above or by emailing WSAS at wsasloans@wellesley.edu any time up to 10 business days preceding the scheduled date of electronic fund transfer.

I further understand that should my bank dishonor my automated payment for insufficient or uncollected funds, the original payment amount, plus an additional fee transaction in the amount of \$5.00 may be electronically debited from my account.

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

0.9				
Agreed Upon Amount and Terms				
Му ассо	ount will be debited quarterly on the 30 <sup>th</sup> day of January, April, July and October beginning the next billing quarter.			
Choose	ONE option:			
	Quarterly payment amount of Principal and/or Interest (and incurred Fees if applicable) due as per my repayment schedule or agreement.			
	Recurring quarterly payment amount of \$ (Amount entered must be greater than currently owed quarterly principal and interest; e.g. if you owe \$100 in quarterly principal and \$5 in quarterly interest, amount entered must be \$105 or greater.)			