



PO Box 328 • 13 Sokokis Trail, East Waterboro, Maine 04030
207-286-7232 • Fax 207-247-3987

Authorization Agreement for ACH Debits

Customer/Company Name: _____

I (We) hereby authorize JD's Package Store, Inc. to initiate debit entries and to initiate if necessary, credit entries and adjustments to my/our checking account indicated below and the depository named below.

Depository (Bank) Name: _____

Bank Routing/ABA # _____

ACCOUNT # _____

This authority is to remain in full force and effect until JD's Package Store has received written notification from me of its termination in such time and in such manner as to afford JD's Package Store a reasonable opportunity to act on it.

Should you have any questions, or require an updated written authorization, please contact Michael at 207-286-7232, jdpackage@hotmail.com

Name: _____ Date: _____
(Please print clearly)

Email: _____ Phone: _____

Signature: _____

PLEASE ATTACH A VOIDED CHECK