

**Russell C. Simon
Chapter 13 Trustee
24 Bronze Pointe
Swansea, IL 62226
(618) 277-0086**

AUTHORIZATION FOR ELECTRONIC DISBURSEMENTS

Creditor Requesting Electronic Disbursement:

Creditor Name: _____

Creditor Address: _____

Creditor Number (Trustee Use Only): _____

Your Bank Name: _____

Bank Address: _____

ACH Coordinator – (Bank Contact):

Name: _____

Verified: _____

Title: _____

Phone: _____

Date: _____

Account Information

Routing Transit Number: _____

Account Name: _____

Account Number: _____

Account Type (Checking or Savings): _____

Russell C. Simon, Chapter 13 Standing Trustee, hereafter called Trustee, is hereby authorized to initiate credit entries to the account indicated above. This authority is to remain in full force and effect until TRUSTEE has received written notification from me or other authorized representative of its termination in such time and in such manner as to afford TRUSTEE a reasonable opportunity to act on it. This authorization will terminate if TRUSTEE discontinues the Electronic Creditor Disbursement Program.

Authorizing Signature

Verified: _____

(Print Name)

Title

Date: _____

Telephone Number

Email Address