East Dundee and Countryside Fire Protection District

401 Dundee Avenue, East Dundee, IL 60018 (847)426-7521 www.edfire.com

ACH Credit Authorization

I (we) hereby authorize East Dun COMPANY, to initiate credit entr Checking Account/Sav institution named below, hereina	ries (and appropriate debit rings Account (select one)	t and adjustment entrice indicated below at the	es) to my (our) depository financial	`
acknowledge that the origination provisions of U.S. law.				•
Business Name:				
Street Address:	City:	State:	Zip:	
		A de la companya del companya de la companya del companya de la co		
Name on bank account:				
Bank Name:				
Bank Address:	City:	State:	Zip:	
Bank Routing Number:				
Bank Account Number:		<u> </u>		
This authorization is to remain in	full force and effect until	the COMPANY has rec	eived written	
notification from me (or either o	f us) of its termination in	such time and in such r	manner as to afford the	ž
COMPANY and DEPOSITORY a re	asonable opportunity to a	ect on it.		
Name				
Signature	Date	market and the second		
Name				
Signature	Date			
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I acknowledge that funds I receiv	e from the COMPANY wil	i not leave the territori	iai United States	
Initials				

Return completed form via one of the following forms of transmission:

Email: webmail@edfire.com

U.S. Mail: East Dundee Fire District, ATTN: Accounts Payable, 401 Dundee Ave,. East Dundee, IL 60118