

**Bizzy B's TUMBLEBUS Debit Authorization**

**AUTHORIZATION FORM FOR DIRECT PAYMENT ACH DEBITS**

Company Name \_\_\_\_\_ Company ID Number: \_\_\_\_\_

I hereby authorize Bizzy B's TUMBLEBUS , hereinafter called Bizzy B's TUMBLEBUS, to initiate debit entries for your child's participation on the TUMBLEBUS to my account indicated below and the financial institution named below, hereinafter called Austin Bank to debit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Financial Institution Name:	Branch:
Address:	Type of Account (check one below):
City/State:	Checking:
ZIP:	Savings:

Account Name:
Routing Number:
Acct Number:

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

Print Individual Name:
Individual ID Number:
Signature:
Date:

**PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM!**