

Vendor Authorization Agreement for Direct Deposit (ACH Credits)

I hereby authorize Wyandotte Nation to initiate credit entries to my account indicated below. I also authorized the depository or depositories named below to credit and/or debit the same to such account. This authority is to remain in full force until written notification of its termination.

☐ New ACH Deposit		nge ACH Deposit	
Type of Account (choose one)	Bank ACH Information		
☐ Savings	Depository Name		
	Branch		
☐ Checking	City, State, Zip		
	Routing Number		
☐ Online Banking	Account Number		
This authorization is to remain in effect until Wyandotte Nation receives written notification from me of its termination, in such time and in such manner as to afford both Wyandotte Nation and the depository a reasonable opportunity to act on it.			
Name (Please Print)		Signature (Required)	
Email		Date	(mm/dd/yyyy
Attach a voided check or bank statement showing routing and account numbers.			