

Authorization for Automatic Deposits to Bank Account

Name(s) on the account _____

Name of bank (My Bank) _____

Bank routing number _____
(typically the 9 digits between the “:” marks on your check)

Account number (My Account) _____

Deposit to checking Deposit to savings

I hereby authorize WJD Management and Burke and Herbert Bank and Trust Company to initiate deposits (credits) to My Bank through the Automated Clearing House system. I further authorize WJD Management and Burke and Herbert Bank and Trust Company to initiate withdrawals (debits) from My Bank to correct any errors that may have been made with credits to My Account.

This authorization will remain in effect until I give WJD Management written notice that I no longer wish to utilize the Automated Clearing House system and WJD Management shall have five (5) business days to act on that notice. Conclusion of WJD Management’s authority to initiate credits to My Bank through the ACH system shall not alter WJD Management’s authority to initiate debits from My Bank to correct or adjust credits posted to My Account before notice of termination of authority notice was received.

I warrant to WJD Management, Burke and Herbert Bank and Trust Company and My Bank that:

Only my signature is required to validate this authorization form

Required Signature _____ Today’s Date _____

All parties required to validate this authorization form have signed it

Additional Required Signature _____ Today’s Date _____

NOTE: To complete your registration this form must be returned to WJD with a VOIDED CHECK from the referenced account.