MARSHA L. COMBS-SKINNER

Chapter 13 Standing Trustee Central District of Illinois

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEBIT ORIGINATION

I (we) hereby authorize the Chapter 13 Trustee, hereinafter called TRUSTEE, to initiate debit entries as follows:

Amount to be Pulled

Date

Starting Month

| The 5 th of each month | | |
|------------------------------------|--|---------------------------------|
| The 17 th of each month | | |
| Said above amounts shall contin | nue to be debited each month there | eafter, from my (our) checking/ |
| savings account as indicated | below, and the depository nan | ned below, hereinafter called |
| DEPOSITORY, to debit the s | ame such account. In addition | , I (we) hereby authorize the |
| TRUSTEE to debit our account | for reimbursement of any fees inc | urred due to any returned items |
| on my (our) account. | | |
| Bank Name: | | |
| Transit/ABA (Bank Routing) No | D.: | * |
| Account No.: | Type of Acco | ount: Checking |
| | | ☐ Savings |
| received written notification fro | ll force and effect until the TRUS m me (or either of us) of its termi and DEPOSITORY a reasonable | nation in such time and in such |
| Name: | Case No: | |
| Signed: | Date: | |
| Your phone number: | | |
| Please allow a minimum of ten | (10) days to process. | |

*Note: The Transit/ABA number is a nine (9) digit number that is found on the bottom left of your check, before your account number. Please do not use a deposit slip to locate this number.

PLEASE ATTACH A VOIDED CHECK TO THIS AUTHORIZATION