

230 16th Street • Rock Island, IL 61201 (309) 788-4561 • (800) 627-4762 contact@royalneighbors.org • www.royalneighbors.org

Direct Deposit Authorization Agreement

I authorize Royal Neighbors of America (Royal Neighbors) to direct deposit all funds to be paid to the holder of the account listed below. To do so, I hereby authorize Royal Neighbors to initiate credit entries (deposits) and to initiate, if necessary, debit entries and adjustments for credit entries made in error to my:

Jere.	☐ Checking account – please enclose a copy of your voided check					
d	or					
voided check or encoded deposit slip here	☐ Savings account – please enclose an encoded deposit slip					
ed d	Provide the information for your direct deposit account and financial institution below:					
DOOL	Bank name Branch					
or er	Mailing address					
eck	City		Si	tate	ZIP	
ed C	Account number	er Routing transit number				
NOIG						
Attach	•	his authority is to remain in full force and effect until terminated with written notification by me in such time d in such manner as to afford Royal Neighbors a reasonable opportunity to act on such notice.				
Name on account (Royal Neighbors certificate owner, sales agent, or chapter no.): Royal Neighbors certificate no., agent ID no., or chapter no.						
	Signature as shown on band	k account			Date	
	Printed name of signor					