

AUTHORIZATION REVOCATION

Date _____
Company Name _____ Dept. _____
Address _____
City, State, Zip _____

As of the date listed above, I _____ hereby notify
(Consumer's Name)
you, _____, to terminate the authorization agreement covering the
(Company's Name)
pre-authorized debit to my account _____ with my financial
(Account Number)
institution, _____. My policy number or account
(Receiving Financial Institution's Name)
number with your company is _____.

Please be advised that with this revocation you can no longer send these entries to my financial institution. I indemnify my financial institution from any and all liability associated with the return of future entries.

In addition to notifying you of my revocation, I will keep a copy of this notice and provide a copy to my financial institution.

(Signature) _____ Date

Authorizations for electronic debit payment(s) remain in effect until the consumer notifies the originating company that the authorization has been revoked. The originating company determines whether phone notification or written notification is required to revoke an authorization. It is recommended that all phone notifications by the consumer be followed by written notification to the originating company. The sample letter above can be used by consumers to revoke their authorization and should be mailed to the originating company immediately, by registered mail. If an unauthorized debit is sent to a consumer's account, an Affidavit of Unauthorized Entry must be completed and signed by the consumer for the unauthorized entry to be returned.