

## Automated Payments (ACH) Customer Authorization Form

WSAS can now automatically deduct your quarterly payment from your checking account. Complete this form and attach a voided check (or letter from your bank if you do not have checks). Return this information to:

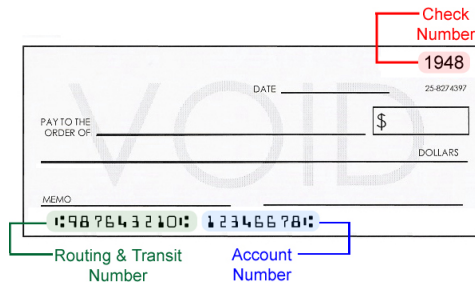
**Wellesley Students' Aid Society, 106 Central Street Schneider 117, Wellesley, MA 02481-8203**

Name			
Address	City	State	Zip Code
Phone Number	E-Mail Address		

### Banking Information

Bank Name	Name on the Account
Bank Routing Number (see example below)	Bank Account Number (see example below)

**PLEASE ATTACH A VOIDED CHECK TO THIS FORM**



I hereby authorize a quarterly ACH (Automated Clearing House) electronic debit from the account designated above to be paid to Wellesley Students' Aid Society, Inc., in payment for owed tuition loan principal, interest, and incurred fees (if applicable) not to exceed the amount agreed to by me below.

This authorization is to remain in full force and effect until such time that my indebtedness is fully satisfied. The specific debit to my account authorized herein may only post on or after the debit date(s) listed below, and in no event may the debit transaction post to my account prior to said date(s). **I may only revoke this authorization by contacting WSAS in writing at the address above or by emailing WSAS at [wsasloans@wellesley.edu](mailto:wsasloans@wellesley.edu) any time up to 10 business days preceding the scheduled date of electronic fund transfer.**

**I further understand that should my bank dishonor my automated payment for insufficient or uncollected funds, the original payment amount, plus an additional fee transaction in the amount of \$5.00 may be electronically debited from my account.**

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Signature	Date
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### Agreed Upon Amount and Terms

My account will be debited quarterly on the 30<sup>th</sup> day of January, April, July and October to begin on the 30<sup>th</sup> day of the next billing period.

Choose ONE option:

- Quarterly payment amount of Principal and/or Interest (and incurred Fees if applicable) due as per my repayment schedule or agreement.
- Recurring quarterly payment amount of \$\_\_\_\_\_ (Amount entered must be greater than currently owed quarterly principal and interest; e.g. if you owe \$100 in quarterly principal and \$5 in quarterly interest, amount entered must be \$105 or greater.)