

Electronic Payment Authorization for Recurring Payments

Date: [Insert Date]

To: [Recipient's Name]

Company Name: [Company's Name]

Address: [Company's Address]

Dear [Recipient's Name],

I, [Your Name], hereby authorize [Company's Name] to initiate electronic payments from my account as detailed below for the purpose of recurring payments.

Account Information

Account Holder Name: [Your Name]

Bank Name: [Your Bank's Name]

Account Number: [Your Account Number]

Routing Number: [Your Routing Number]

Payment Details

Payment Amount: [Amount]

Payment Frequency: [Weekly/Monthly/Quarterly]

Start Date: [Start Date]

This authorization will remain in effect until I provide written notice of termination to [Company's Name].

Thank you for your attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Contact Information]