

ORANGE COUNTY VECTOR CONTROL DISTRICT
ELECTRONIC FUNDS TRANSFER AUTHORIZATION

I hereby authorize Orange County Vector Control District (OCVCD) to initiate deposits (credits) and/or corrections to the previous credits to the financial institution indicated below. The financial institution is authorized to credit and/or correct the amounts to my account.

I understand that the financial institution and my account number must be verified for accuracy through the Federal Reserve System and that I will continue to receive a check until verification has been completed. I understand that this process will take approximately one week.

I understand that if I change my financial institution or my account number, I must complete and submit a new Electronic Funds Transfer Authorization with notice for the new information to be verified through the Federal Reserve System. I understand that the consequences of not completing an Electronic Funds Transfer Authorization in a timely manner will create a delay in receipt of funds to the new account until any previously deposited funds have been returned to OCVCD. I will receive a check if there is insufficient time to verify the new financial institution or account number, until such time as the new information has been verified.

I understand and agree that when time constraints prevent meeting OCVCD or bank scheduling requirements, I will receive a check.

If funds to which I am not entitled are deposited to my account, I authorize OCVCD to request the financial institution to return said funds.

I further agree that this electronic funds transfer is performed as a convenience to me as a Trustee of OCVCD and agree not to hold OCVCD, its officers, agents and Trustees liable for any error or omission made by the depositing or receiving financial institutions or by the Federal Reserve Automated Clearing House.

This authority is to remain in full force and effect until either I revoke it by giving ten (10) days prior written notice to OCVCD, or upon termination of my term with OCVCD.

Staple only a **VOID check** here...

Financial Institution (name of Bank, Credit Union, etc.)

PRINT: Trustee's Name

Account Number

Trustee's **Signature**

Print clearly **E-Mail address for Deposit notification**

Date