

F U N E R A L  F U N D I N G
OF MICHIGAN

DIRECT DEPOSIT (ACH) AUTHORIZATION & AGREEMENT

Funeral Home: _____ Tax ID: _____

I (We) hereby authorize **Funeral Funding of Michigan, Inc.** (hereinafter called "**Company**"), to initiate credit entries to my (our) checking account indicated below at the depository financial institution named below (hereinafter called "**Depository**") and to credit the same to such account.

Depository Name: _____ Branch: _____

City: _____ State: _____ Zip: _____

Routing Number: _____ Account Number: _____

This authorization is to remain in full force and effect until Company has received **written notification** from me (or either of us) of its termination in such time and in such manner as to afford Company and Depository a reasonable opportunity to act on it.

Printed Name(s): _____ ID #: _____

Signature(s): _____ Date: _____

NOTE: All written credit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.