

**ACH Origination Agreement  
Schedule 4  
(DIRECT DEPOSIT)**

I authorize YADKIN VALLEY ECONOMIC DEVELOPMENT DISTRICT, INC. and the financial institution named below

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (PLEASE PRINT) \_\_\_\_\_

Address (PLEASE PRINT) \_\_\_\_\_  
\_\_\_\_\_

Name of Financial Institution \_\_\_\_\_

Financial Institution Routing Number \_\_\_\_\_

Bank Account Number \_\_\_\_\_

Bank Account Type       Checking       Savings

Amount       Set Amount of \$ \_\_\_\_\_  
                  Remaining Net Wage Balance

Note: In the case of revoked authorization, all written authorizations must be revoked only by notifying the originator in writing no later than 15 days before the next transactions effective date.