AUTHORIZATION AGREEMENT- For Electronic Funds Transfers (ACH Debits)			
Company Name:		Tax ID Number:	
Mary Linsmeier Schools, Inc.		39-1160348	
I/we hereby authorize Mary Linsmeier Schools, Inc. hereinafter called MLS, to initiate debit entries to			
my/our account indicated below and the bank named below, hereinafter called My Bank, to debit the same			
to such account.			
My Bank Name:		Routing Number:	
City, State, Zip:		Bank Account Number:	
Circle one:			
Checking or Savings			
Checking of Savings			
This automatic withdrawal will remain in full force and effect until MLS receives written notice ending			
this authorization. The written notice must be received at least 5 business days prior to a deduction. I or			
either of us has the right to stop payment by notifying MLS within 24 hours of the scheduled deduction.			
MLS will send by email a statement showing the amount that will be deducted at least 3 business days			
before the deduction takes place. Contact MLS if you have any questions regarding the amount of the			
deduction.			
Parent Account Number:	Email Account:	ınt:	
Name (Please Print)			
1 11110			
Signature		Date	
Name (Please Print)			
Traine (Tieuse Time)			
Signature		Date	
I			
It is recommended that you check with your bank to verify the routing number and			

account number. *If using a checking account, please attach a voided check.

Example:

I¦123456789 I¦ 700012498II* 1001 Routing Number Account Number Check (Exactly 9 digits) Number