



CANNON WRIGHT BLOUNT

Authorization Agreement for One Time Debit

I _____ hereby authorize **Cannon Wright Blount PLLC** to initiate a one time draft to my account at the financial institution named below. I also authorize **Cannon Wright Blount PLLC** to make credits to this account in the event that a debit entry is made in error. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Further, I agree not to hold **Cannon Wright Blount PLLC** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing/drafting funds to/from my account.

Account Information

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____

Checking

Savings

Signature

Authorized Signature (Primary): _____ Date: _____

Authorized Signature (Joint): _____ Date: _____

Draft Amounts

Draft Amount: _____

Draft Date: _____