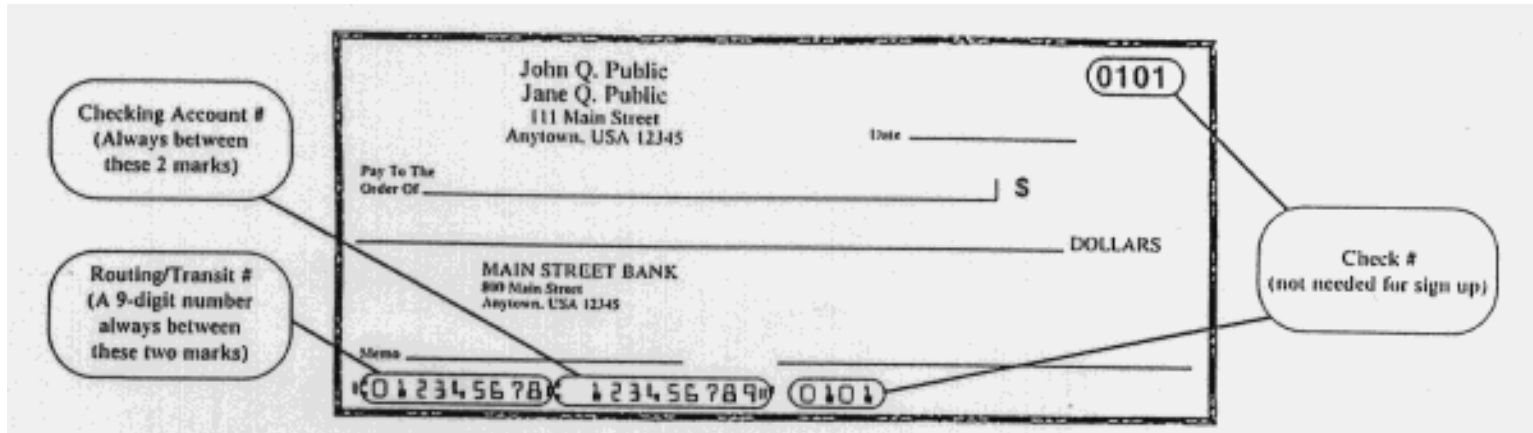


ALANYC FULL SERVICE ACH DEPOSIT ENROLLMENT FORM

To enroll in Full Service ACH Deposit, simply fill out this form and give it to the Financial Officer. Attach a blank voided check for each checking account - not a deposit slip. If depositing to a savings account, ask your bank to give you the Routing/Transit Number for your account. It isn't always the same as the number on a savings deposit slip. This will help ensure that you are paid correctly.

Below is a sample check detailing where the information necessary to complete this form can be found.



Important! Please read and sign before completing and submitting.

I hereby authorize the ALANYC to deposit any amounts owed me by initiating credit entries to my accounts at the financial institutions (hereinafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by the ALANYC to my accounts. In the event that the ALANYC deposits funds erroneously into my account, I authorize the ALANYC to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until the ALANYC and Bank have received written notice from me of its termination in such time and in such manner as to afford the ALANYC and Bank reasonable opportunity to act on it.

Name: _____

Signature: _____

Date: _____

Account Information

1. Bank Name/City/State: _____

Routing/Transit #: _____

Account Number: _____

Checking

Savings