

**City of Minneapolis**  
**AUTHORIZATION AGREEMENT**  
**FOR AUTOMATED CLEARING HOUSE (ACH) CREDITS**

**Company Name** \_\_\_\_\_ **Vendor #** \_\_\_\_\_

I (we) hereby authorize the City of Minneapolis, the originator, to initiate credit entries to my (our) company ( ) **Checking Account** ( ) **Savings Account** (select one) at the depository financial institution named below and to credit such account.

**Bank Name** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Routing No.** \_\_\_\_\_ **Account No.** \_\_\_\_\_

This authorization is to remain in full force and effect until the City of Minneapolis has written notification from me (representative) of its termination and in such a manner as to afford the City of Minneapolis and the Depository reasonable opportunity to act on it.

**Contact Name(s)** \_\_\_\_\_ **Phone** \_\_\_\_\_  
(PLEASE PRINT)

**Mailing Address** \_\_\_\_\_  
(Address notification should be mailed to)

**Authorized Signature** \_\_\_\_\_

*NOTE: ALL WRITTEN CREDIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN MANNER SPECIFIED IN THE AUTHORIZATION.*

Please fax to 612-673-2888 or mail to: City of Minneapolis  
350 South 5<sup>th</sup> Street  
Room 323M Attn: Judy Greenwald  
Minneapolis, MN 55415