

<u>Authorization Agreement for ACH Debits</u> (Monthly Transfers from Your Bank Account)

I (we) hereby authorize the Institute for Creation Research (Tax ID# 95-3523177) to initiate debit entries to my (our) account indicated: ☐ Checking account ☐ Savings account (select one) at the depository financial institution named below, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with provision of U.S. law. Depository Branch____ Name City State Postal Code Bank routing/ABA/Transit Number | | | | | | | | | | | | Bank account number ☐ on 1st of each month on 5th of each month \Box on 10th of each month \Box on 15th of each month Monthly Amount ☐ on 20th of each month □ on 25th of each month This authorization is to remain in full force and effect until the Institute for Creation Research has received written notification from me (or either of us) of its change or termination in such time and in such manner as to afford the Institute for Creation Research and the depository named above a reasonable opportunity to act on it. Name 1 Name 2 Signature 1 Signature 2 Date 1 Date 2 Address City State Postal Code Phone _____ Email

Note: All written debit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

- Complete this form and include a voided check (optional) from the bank account above.
- Email to giving@icr.org : Fax to 214-615-8297
- Or mail to ICR, Attn: Accounting, P. O. Box 59029, Dallas, TX 75229

If you have questions, please contact the Accounting Department at ICR at 800-337-0375 or email giving@icr.org. Please contact ICR if your bank is not a U.S. bank.