

GETTING STARTED WITH ACH

Automated Clearing House (ACH)

ACH can save you time and money. It is the most dependable method for making your deposit each month. Using ACH eliminates the cost of purchasing money orders and stamps, and the worry of missing your due date if the money order is lost or delayed in the mail.

When you use ACH, **your monthly deposit is automatically drafted from your bank account** at the same time each month. Missing a deposit or making a late or partial deposit can jeopardize concessions granted by your creditors. ACH gets your deposit to ClearPoint at the same time each month and **allows us to pay your creditors at the same time each month.**

How to Setup the Draft

- 1) Fill out form items 1 through 10 of the Electronic Funds Transfer Authorization form.** Be sure to include your name, social security number, debit amount and date, and your bank's physical address (forms with P.O. Box addresses will not be processed).
- 2) Circle your preferred debit date.** Remember, at start up, we need to check the accuracy of the account information you have given us, so it is important to complete your application and return it at least 7 days before you want your account drafted.
- 3) Sign and date the bottom of the form.** If the account being drafted is a joint account, please have the joint account holder sign and date as well.
- 4) Attach a blank voided check** (for withdrawals from a checking account) or a savings deposit slip (for withdrawals from a savings account) to the form and return it for processing. The check must be pre-printed with your name and account information; starter checks will not be accepted.
- 5) Return the completed form and voided check** by fax: 404-260-3329, secure email: zzzach@clearpointccs.org or mail: Attn: ACH 270 Peachtree St. Suite 1800, Atlanta, GA 30303.

Please note: Original or faxed copies of the enrollment form and voided checks/deposit slips are acceptable.



Automated Clearing House (ACH) Agreement

I (we) hereby authorize Bank of America, agent for my (our) creditor, named below, to initiate debit entries to my (our) bank account indicated below, further, I (we) authorize the financial institution named below, to debit the same account on the date indicated below. **Please note it may take up to 10 days before funds are disbursed.**

I (we) agree that I (we) will not void any payments drafted from my (our) personal bank account to pay for my (our) DMP. In the event that I (we) breach this agreement by voiding any such payments after ClearPoint has disbursed funds to my (our) creditors pursuant to my (our) DMP, I (we) agree to reimburse ClearPoint for the amount of such disbursements and any out-of-pocket expenses incurred by ClearPoint in connection with my (our) breach of this agreement.

- 1) SSN: _____ Client# _____
- 2) Name(s): _____
- 3) Total Monthly Debit Amount \$ _____
- 4) Debit Date (circle one): 4th 8th 17th 21st 28th 30th
- 5) Start Date (month/year): _____

This authority is to remain in full force and effect until the contract amount has been reached or ClearPoint has received written notification from the undersigned of its termination 2 business days prior to the draft date to afford opportunity.

A customer has the right to stop a debit entry by notification to their financial institution prior to charging account. A customer has the right to have an erroneous debit re-credited to his/her account in accordance with the provisions of Federal Reserve Board Regulation E - Electronic Funds Transfer.

Financial Institution Information

- 6) Bank Name: _____
- 7) Bank Address: _____
- 8) ABA Routing Number: _____ Creditor: **ClearPoint**
- 9) Account Number: _____
- 10) Account Type (circle one): Checking Savings

(NOTE: Bank information may be left blank if a voided check is attached)

[I HAVE READ AND AGREE TO THE ABOVE GUIDELINES.](#)

Signature

Date

Signature

Date