

Monthly Recurring ACH Payment Authorization Form

Schedule your loan payment to be automatically debited each month from your checking or savings account. Just send the completed and signed form to the mailing address above, or fax it to (703) 241-7431, or email a scan or digitally signed PDF to payments@jefferson.capital

Automatic Monthly Recurring Payments Will Make Your Life Easier.

- It's convenient, saving you time and postage.
- Your payment is always on time (even if you're away), eliminating late charges.

I (we) hereby authorize Jefferson Capital LC to initiate entries to my (our) checking/savings accounts at the financial institution listed below, and, if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until Jefferson Capital LC is notified by me (us) in writing to cancel it in such time as to afford Jefferson Capital LC and the financial institution a reasonable opportunity to act on it.

Signature(s) – Download PDF to digitally sign

Date (MM/DD/YYYY)

Name(s) on Account - PLEASE PRINT

Address of Account Holder(s) - PLEASE PRINT

Amount Per Month: \$ _____ Checking or Savings

Name of Financial Institution

Financial Institution ACH Routing Number* (9 digits): _____

Checking/Savings Account Number*: _____

*These numbers are located on the bottom of your check as follows:

