

Prepaid Affordable College Tuition

PACT/State Treasury

Automatic Payment Authorization

You have purchased a PACT contract to pay for college tuition and qualified fees. To make payments by automatic deduction, please complete this form and mail it to the PACT Program at P.O. Box 12865, Birmingham, Alabama 35202-2865. You may also fax the form to 1-800-830-7390.

Please allow 60-90 days from receipt of your request for processing. One monthly payment amount will be debited from your account on the 1st business day of each month, and a record of these payments will appear on your bank statement. You will be notified in writing by this office when the automatic payments are scheduled to begin; please make your monthly payments by coupon until you have been notified that your automatic deduction has started.

(TO BE COMPLETED BY THE PURCHASER)

Automatic Payment Authorization

Purchaser Name: _____ **PACT Account Number:** _____

Beneficiary Name: _____ **Monthly Payment:** _____

I hereby authorize the PACT Program to initiate debit entries for the monthly payment reflected above, and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (check one) **checking** **savings** account at the financial institution named below.

This authority is to remain in full force and effect until the account is paid in full, or the PACT Program has received written notification from me of its termination in such time and such manner as to afford the Program and the financial institution a reasonable opportunity to act. In the event of repeated unsuccessful debits, I understand that PACT reserves the right to cancel this form of payment and that I will be notified in writing of such action.

Account Owner's Signature

Date

Financial Institution		
City	State	Zip
Transit Routing Number: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Bank Account Number: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
_____ Account Owner's Signature		
_____ Date		_____ Phone Number