



AUTO PAY FORM

PO Box 4597 | Oak Brook, IL 60523-4597 | (866) 455-7623

We invite you to join our convenient, automatic withdrawal program which automatically transfers your monthly loan payment from your financial institution to FreedomRoad Financial. Each transaction is then recorded as a deduction on your regular bank statement.

CUSTOMER INFORMATION			
Customer Name:		Today's Date:	
Account Number:		Start Date:	
Payment Amount:		Frequency:	Monthly

BANKING INFORMATION			
Bank Name:		Routing Number:	
Account Number:		Account Type:	

I (we) authorize FreedomRoad Financial ("Company") to electronically debit my (our) account as indicated in the form above. If necessary, I (we) authorize Company to electronically credit my (our) account in order to correct erroneous debits. I (we) also acknowledge that the origination of ACH entries to my (our) account must comply with the provisions of U.S. Law. This authorization will remain in full force until I (we) notify Company by written confirmation that I (we) wish to revoke this authorization, and in such manner as to afford Company a reasonable opportunity to act on it.

AUTHORIZATION(S)	
Signature:	Date:
Signature:	Date:

Please fax completed form to 630-684-0278; or mail to:

FreedomRoad Financial
 Attn: Loan Operations
 PO Box 4597
 Oak Brook, IL 60523-4597

Internal Use Only			
Input By:		Date:	
Verified By:		Date:	

