

**GET YOUR BUDGET GOING WITH
A STANDING SCRIP ORDER &
Win \$50 SCRIP
of your choice!**

**We are running a promotion for the next
month with winners in two categories:**

- **Current Standing Order Holders:**
As a thank-you for your continued support of ASB scrip, all will be entered into our drawing for one person to win \$50 scrip of your choice. We will draw a name from the hat and announce the winner February 1st.
- **New Standing Order Enrollees:**
All new orders turned in by February 9th will also be eligible to win \$50 scrip of your choice. Winner to be announced February 15.
(A standing order form is available on the next page – just fill in the information and turn in to Kathryn Almy in the ASB office).

**SCRIP for groceries and gas is a perfect way to
get started and support ASB with the purchases
you make on a regular basis!**

**Any questions or changes that need to be made to an
existing standing order – contact Molly Dennehy :**

mbdennehy@comcast.net

EFT FOR SCRIP



Please complete all of the following:

Family Name: _____ Youngest Child's Homeroom _____

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS

(ACH DEBITS)

I (we) hereby authorize _____, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account/ Savings Account (select one) indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Name _____ **Branch** _____

City _____ **State** _____ **Zip** _____

Routing # _____ **Account #** _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s) _____

Date _____ **Signature** _____

PLEASE ATTACH A VOIDED CHECK

Standing Order Requests

Name: _____ Phone: _____

Vendor: _____ Amt.: \$ _____

Vendor: _____ Amt.: \$ _____

Vendor: _____ Amt.: \$ _____