

CONTRIBUTION AND LOAN FUNDING ACH AUTHORIZATION

Plan Number	Employer
Account Name*	
4F	
*For clients with multiple funding accounts only.	
Select ONE of the following options:	
Add this new ACH account information as listed below.	Correct ACII on Associat Ending in Ivywy
Replace my current ACH on file with the information as listed below	Current ACH on Account Ending in (xxxx) —>
Delete the ACH account listed below.	
Bank Name	
ABA Number	Bank Account Number
ADA Namber	Bulli Facesule Hallise.
Account Type	
☐ Checking ☐ Savings	
When adding or replacing accounts:	
Attach a voided, blank check or photocopy of a check.	
If there is a debit block on the account, provide ID #1450140105 to your bank in order to authorize payment.	
As an authorized signer for the plan , I hereby authorize Alerus Financial, N.A. on behalf of Alerus retirement and benefits to transfer (debit) funds	
from the bank account listed above via automated clearing house (ACH), from the date of this form and until further notice. The transferred funds represent plan contributions including loan payments and should typically be in an amount equal to the total on the payroll contribution file sent	
periodically from our company. I agree to maintain a sufficient balance to co	· · · · · · · · · · · · · · · · · · ·
this account, should there be a need for adjustments or correcting entries. This authorization is separate from any agreement I may have for the	
plan fee transactions.	
This authorization will remain in effect until it is cancelled in writing.	
Print Name	Date
X	
Signature	