

**PHILLIPS EXETER ACADEMY - STUDENT LOAN PROGRAM  
AUTHORIZATION AGREEMENT FOR DIRECT WITHDRAWALS (ACH DEBITS)**

NAME: \_\_\_\_\_

<b>Loan Number</b>	<b>Mo. Debit Amount \$</b>
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**MO. TOTAL \$** \_\_\_\_\_

I hereby authorize **Phillips Exeter Academy** to initiate debit entries from my U.S. Checking ( ) or Savings ( ) account (**select one**) at the financial institution named below on the **20th day** of each month.

Name of Financial Institution \_\_\_\_\_

Branch \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Routing Number \_\_\_\_\_ Account No. \_\_\_\_\_

**(For checking accounts, please attach a check marked "VOID")**

This authorization is to remain in full force and effect until **either** party terminates this Agreement.

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
or Tax. ID No. \_\_\_\_\_  
(Please Print)

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date \_\_\_\_\_ Signed X \_\_\_\_\_

*Return to:*  
Accounting Office  
Phillips Exeter Academy  
20 Main Street  
Exeter NH 03833