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**ACH DIRECT DEPOSIT
AUTHORIZATION AGREEMENT**

**I hereby authorize QUALITY COTTON COOPERATIVE, to initiate credit entries to my
Checking _____ Savings _____ account indicated below and the financial
institution named below to credit the same to such account.**

FINANCIAL INSTITUTION NAME

CITY

STATE

TRANSIT/ROUTING NUMBER

ACCOUNT NUMBER

**This authority is to remain in full force and effect until QUALITY COTTON COOPERATIVE has received written
notification from me of its termination in such time and in such manner as to afford QUALITY COTTON
COOPERATIVE a reasonable opportunity to act on it.**

NAME

SOCIAL SECURITY NUMBER

SIGNATURE

DATE

Attach a VOIDED check here: