

# One-Time Bank Transfer Authorization Form

I \_\_\_\_\_ authorize Income Tax Unlimited, LLC to electronically debit my bank account according  
Full name  
to the terms outlined below. I acknowledge that electronic debit against my account must comply with United States law. This payment is for consulting fees only.

## Terms of billing:

### One-time debit when loan funds are deposited into the bank account below:

By signing this form, you give us permission to debit your bank account for the amount indicated on the day loan funds are deposited into the account below. This is permission for a single transaction only and does not provide authorization for any additional unrelated charges or credits to your account.

**THIS IS A ONE-TIME CHARGE. THIS IS NOT A MONTHLY AUTO-DRAFT**

## Customer bank account information:

\_\_\_\_\_ Routing number                      Account number \_\_\_\_\_

Account type:     Checking     Savings     Consumer     Business

Account Name: \_\_\_\_\_

Debit Amount: \_\_\_\_\_

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
Customer signature                      Customer printed name                      Date

I authorize the above-named business to debit my account indicated in this authorization form according to the terms outlined above. This payment authorization is for consulting fees described above, for the amount indicated only, and is valid for one-time use only. I certify that I am an authorized user of this account and that I will not dispute this transaction with my bank company, so long as the transaction corresponds to the terms indicated in this form.