

## **AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)**

I (we) hereby authorize AL GLOBAL CORI	PORATION dba YOUNGE	EVITY®, hereinafter called COMPANY, to initiate
debit entries to my (our)		
select one		
☐ Checking Account		
☐ Savings Account		
, ,		n, hereafter called BANK, and to debit the same ansactions to my (our) account must comply with
My (Our) Bank		Branch
City	State	Zip Code
Routing Number	Account Number	r
Name(s) on Bank Account		
		NY has received written notification from me (o s to afford COMPANY and BANK a reasonable
Name(s)		ID Number
Date Signat	ture	

Fax this form to: (619) 934-3205



## FORM SUBMISSION INSTRUCTIONS:

- 1. Include a copy of the account holders voided check to this form when submitting.
- 2. Email directly to <a href="mailto:mhooper@youngevity.com">mhooper@youngevity.com</a> or <a href="mailto:support@youngevity.com">support@youngevity.com</a>, fax to 619-934-3205 or send via US Mail.
- 3. If you currently do not have an Autoship setup with a credit card payment, an Autoship form would need to be submitted with the ACH form. You may also call into Customer Service to set up an Autoship profile at 1-800-982-3189 and payment details would be applied once this is completed.
- 4. Autoship profiles can be changed online or by phone at least 1 business day before the selected Autoship date.
- 5. ACH orders will not post for 7-10 days from process date.