

# USA GATEWAY INC.

dba GTT International / dba Majestic Vacations  
4100 Spring Valley Rd., #202, Dallas, TX 75244  
TEL: 972-239-5069 972-980-4743

## DEBIT AUTHORIZATION FORM

### AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS (ACH DEBITS)

COMPANY  
NAME **USA Gateway Travel**                      GTT ACH  
Reference ID \_\_\_\_\_

I hereby authorize USA Gateway Travel, hereinafter called GTT, to initiate debit entries and to initiate, if necessary, adjustments for any debit entries in error to my Checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit to such account. I (we) acknowledge that the origination of the ACH transactions to my (our) account must comply with the provisions of the U.S. law.

From here onward, check with the debit amount will be faxed to GTT, the check will serve as the means to dictate the amount of funds GTT will debit my (our) checking account each time. GTT will only debit once for each check received.

DEPOSITORY (Bank Name)

NAME \_\_\_\_\_ BRANCH \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TRANSMIT ACCOUNT  
ABA/NUMBER \_\_\_\_\_ NUMBER \_\_\_\_\_

This authority is to remain in full force and effect until GTT has received written notification from me (or either of us) of its termination in such time and in such manner as to afford GTT and DEPOSITORY a reasonable opportunity to act on it.

AGENCY NAME \_\_\_\_\_  
(PLEASE PRINT)

GTT ACCOUNT CODE \_\_\_\_\_

NAME(S) \_\_\_\_\_  
(PLEASE PRINT)

SIGNED X \_\_\_\_\_ DATE \_\_\_\_\_

Recurring Debit – Agency

**Please fax to 972-432-7636**