



GOLDSTAR
TRUST COMPANY

**ONE-TIME
BANK DRAFT REQUEST**

P.O. Box 719
Canyon, TX 79015
(800) 486-6888
Fax (806) 655-2490
info@goldstartrust.com

ACCOUNT HOLDER

Name: _____ GoldStar Account #: _____
Address: _____ Daytime Phone: _____
_____ Email: _____

BANK INFORMATION

GoldStar Trust Company is hereby requested and authorized to withdrawal (debit) from my checking account at the:

Bank Name: _____ Bank Phone: _____
Bank Address: _____
City: _____ State: _____ Zip: _____
Name on Bank Account: _____
Routing / ABA Number: _____ (must be 9 digits in length)
Checking Account Number: _____

If you choose to draft from a savings account, we will need your bank to confirm your savings account number and routing number on bank letterhead.

DRAFT INSTRUCTIONS

Enter the amount to debit from your bank account: \$ _____

Note: It takes 5 business days from the day GoldStar receives your request to establish ACH service and electronically confirm the account with your bank.

A return check fee of \$50 will be charged for insufficient funds.

ACKNOWLEDGEMENT AND SIGNATURE

I hereby authorize GoldStar Trust Company to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my account at the bank named above. I authorize the bank to accept any such debits or credits to my account without responsibility for their correctness. I further agree that GoldStar Trust Company will not incur any loss, liability, cost, or expense for acting upon this request.

Print name exactly as it appears on bank records

X _____
Signature Date