



ACH Payment Authorization Form

I (we) authorize _____ to electronically debit my (our) account (And, if necessary, electronically credit account to correct erroneous debits) as follows:

Bank Account Type (select one):

- Personal Checking Account Personal Savings Account

I authorize electronic ACH debits / credits to the depository financial institution named below ("Financial Institution"). I (we) agree that ACH transactions I (we) authorize comply with all applicable laws.

Name on Account:		Bank Name:	
Bank Account Number:	Bank Routing #:	Bank City/State:	

This Bank Account is Enabled for ACH Transactions

- Yes No

Date(s) and/or frequency of debit(s):

- One time Recurring

Number of Months:	Number of Quarters:
Dollar Amount Authorized:	

I (we) understand that this authorization will remain in full force and effect until I (we) notify in writing that I (we) wish to revoke this authorization. I (we) understand that requires at least (company policy, i.e., 15 days prior notice) to cancel this authorization.

Name(s) <i>(please print)</i> :	
Date:	
Signature(s):	

*I certify that I am an authorized signer for the account indicated above and that I have the authority to authorize this/these transactions. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted transaction date. {*optional In the case the transaction is returned for Non-Sufficient Funds (NSF) I understand that may at its discretion attempt to process the charge again within 30 days and agrees to an additional charge for each attempt returned NSF, which will be initiated as a separate transaction from the authorized payment.} I have certified that the above bank account is enabled for ACH transactions and agree to be responsible for all penalties and fees incurred because of my bank rejecting ACH debits or credits because of the account not being properly configured for ACH transactions. Both parties agree to be bound by NACHA Operating Rules as they pertain to this transaction. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I agree not to dispute this transaction with my bank provided the transaction corresponds to the terms indicated in this authorization form.*