

ACH ENROLLMENT FORM

PAYEE INFORMATION				
Company Name				
Federal Tax ID				
Business Address				
REMIT INFORMATION				
Email 1 (Required)				
Email 2 (Optional)				
BANK INFORMATION		<i>Please indicate:</i>	<i>Account Update</i>	<i>New Setup</i>
If new setup, disregard current information section. If updating bank and/or account, current information is required.				
	Current Information		New Information	
Bank Name				
Bank Routing Number				
Bank Account Number				
Account Type (select one)	Business Checking Business Savings	Personal Checking Personal Savings	Business Checking Business Savings	Personal Checking Personal Savings
Deposit Type (indicate if CTX)	CTX Required		<i>(Personal accounts are PPD only; Business accounts are CCD by default.)</i>	

As a representative of the named Supplier I, _____, authorize _____ ("Buyer") to initiate electronic credit entries ('ACH Entries') for the purpose of making Supplier payment to the bank account shown above, and, if necessary, adjustments for any credit entries made in error to the account. Both parties acknowledges that the origination of ACH transactions to Company's account must comply with the provisions of all U.S. laws, rules, and regulations, including, but not limited to, the National Automated Clearing House Association (NACHA) rules.

This authority is to remain in full force and effect until Buyer has received notification from the Supplier. Buyer must be afforded a reasonable opportunity to act on such termination notice. In no event shall such termination be effective as to entries processed prior to receipt of such notice. Either party may terminate this authorization at any time.

I certify that the information provided is true and correct.

Please include a copy of bank account verification with this form (i.e. voided check, bank letter, deposit slip, or bank statement).

Authorized By: _____
 Printed Name: _____
 Title: _____
 Date: _____

RETURN INFORMATION
Please return this form by email or fax to the Buyer.