

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM

Yes, I would like to take advantage of the security and convenience of electronic funds transfer scheduled or periodic payments.

As a duly authorized signer on the financial institution account identified below, I authorize you to perform

___ single	Date of transaction*: _____ Amount: \$ _____
OR	
___ recurring	Date of transaction*: _____ Amount: _____ Number of transactions _____ or until authorization revoked**

\* Transaction will post on or after the date indicated.

electronic funds transfer debits from the account for payments due or when applicable, apply electronic funds transfer credits to the same.

Furthermore, if any such electronic debit(s) should be returned by my financial institution as unpaid (Non-Sufficient or Uncollected Funds), I authorize, (Merchant) \_\_\_\_\_, to collect a returned item fee of \$25.00 (or the maximum amount allowed by state law) per item by electronic debit from the same account identified below.

For accounting purposes, all electronic debits will be reflected on the monthly bank statement that corresponds with the financial institution account identified below.

I understand and authorize all of the above.

AUTHORIZING SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Print Name: \_\_\_\_\_

\*\*This authorization is to remain in full force and effect until MERCHANT has received written notification of its termination in such time and in such manner as to afford MERCHANT a reasonable opportunity to act on it or the until the term of the authorization expires. Any such notice should be sent to the following address; \_\_\_\_\_

**Financial Institution account "identifying information":**

**Enter financial institution account information in the fields provided below or attach a blank VOID check.**

<b>Co mpl ete or atta ch Bl ank</b>	<b>Financial institution:</b>		<b>Branch:</b>	
	<b>City:</b>		<b>State:</b>	<b>ZIP CODE:</b>
	<b>Transit/ABA #</b>		<b>Account #</b>	

**Need help identifying your Transit/ABA# and Account #?, see reverse for diagram.**

# Example

**Financial Institution**  
510 Money St.  
Anycity, ST. 00000

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□□□□□□□□  
□□□□□□□□  
□□

Pay to the  
Order of

\_\_\_\_\_

\$

□□ \_\_\_\_\_

⋆: xxxxxxxxxx ⋆: 0000 0000

This is the 9 digit Transit / ABA Bank Routing number.

The Account number is usually to the right of the Routing number. Some Financial Institutions add the check number between the Routing and Account numbers