

Electronic Funds Transfer Authorization Form

1. **I the undersigned, certify** that I am a signer on the account listed below with the authority to grant this authorization.
2. **I the undersigned, certify** that "Enter Subscriber Name Here" or any agents of "Enter Subscriber Name Here" is authorized to debit the account referenced below via draft (ACH) or other Electronic Funds Transfers (EFT).
3. **I the undersigned, certify** that the bank referenced below is hereby requested, authorized and directed to honor and treat as authorized, checks, drafts or moneys drawn in my name in accordance with this authorization.
4. **I the undersigned, certify** that in the event any such draft or EFT is returned unpaid, I agree to have the account referenced below debited electronically or otherwise drafted for an item fee of "Enter Fee Here", plus any applicable taxes.
5. **I the undersigned, (if checked) authorize** "Enter Subscriber Name Here" to initiate recurring EFT drafts on the account to pay outstanding balances and obligations as they become due.
6. **I the undersigned, certify** that this authorization shall remain in effect and the authority herein given to "Enter Subscriber Name Here" shall remain irrevocable until "Enter Subscriber Name Here" receives written notice of revocation of such authority. Revocation shall not affect any action taken prior to receipt of such notice.

Customer/Company Name: _____

Street Address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Fax: _____

Bank Name: _____

ABA/Transit Routing # : _____ Account Number: _____

Authorized Signature: _____

Name/Title: _____ Date: _____