

In order to sign up for COMPANY ACH payments, it is necessary to complete the following information. Please print all information to ensure accuracy.

VENDOR NAME _____

VENDOR ADDRESS

YOUR BANK'S FULL NAME & ADDRESS

BANK'S TRANSIT NUMBER

COMPANY'S BANK ACCOUNT NO.

FAX remittance to () _____

OR

E-MAIL remittance to: _____

AUTHORIZING SIGNATURE

TITLE
