

ACH BANK DRAFT
AUTHORIZATION FORM

Date ____/____/____

Customer Name _____

Address _____

Customer Signature _____

Customer Account Number * _____ *

Customer Bank _____

Address _____

Customer Bank Account Number _____

Customer Bank Routing Number _____

Maximum Bank Draft Amount \$ _____

DRAFTS WILL NOT BE MADE ON PAST DUE ACCOUNT
A \$15.00 CHARGE FOR DRAFTS MADE ON ACCOUNTS WITH INSUFFICIENT
FUNDS

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FOR OFFICE USE ONLY

Draft Account Number _____

Bank Account Number _____ Bank Name _____

Bank Routing Number _____ Address _____

Approved: YES NO

OFFICE MANAGER

A VOIDED CHECK FROM YOUR BANK MUST BE ATTACHED
TO BANK DRAFT FORM BEFORE FINAL APPROVAL CAN BE
MADE