



Automated Clearing House (ACH)
Information

ACH Set-up Date

Name of Bank/Financial Institution

Bank Address, City, State & Zip

Phone Number of Bank (Required)

Contact Name (Required)

ACH ABA Number (9 digit Routing #)

Account Number

*****CUSTOMER INFORMATION*****

Customer Number (if known)

Name of Company

Customer Address

Company Contact

Email Address (for transfer notices)

Phone Number

Signature

Date

*****OFFICE USE ONLY*****

ACH Set-Up Completed:

Time:

Initials: