Bank Draft (ACH) Authorization Form

The purpose of a bank draft (ACH) charge is to pay for any or all billing invoices of services when rendered. Please provide the following information.

Client Information

Client name

Address

City

State

Zip

Contact name

Contact's title

Email address

Contact Number

Bank Draft (ACH) Information

Account name (as it appears on check)

Bank name

☐ Checking

Account #

Bank address

☐ Savings

Bank routing number (ABA #)

City

State

Zip

Authorizer's name

Disclaimer

By signing below, I authorize J Chester & Associates, Inc. to draft the account as stated above. I am responsible for providing another form of

payment immediately if a bank draft is return insufficient. If alternate payment method is a credit card, a 3.5% administrative fee will be

added. I agree to the terms as stated in this disclaimer.

This authorization will stay in effect until I notify J Chester & Associates, Inc. in writing thirty (30) days prior to cancellation.

Authorization

Authorizer's signature

Date

attach a voided check for each account here