

ACH AUTHORIZATION



VENDOR INFORMATION

Company Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Accounts Receivable Contact: _____

Phone: _____

Email: _____

AUTHORIZATION

I (we) hereby authorize BenCo Technologies, LLC, hereinafter called COMPANY, to initiate credit entries to my (our) account listed below at the depository financial institution named below, hereinafter called DEPOSITORY, and to credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of the law.

Account Type: checking_____ savings_____

Bank Name: _____ Branch: _____

Account #: _____ Routing #: _____

City: _____

State: _____

Zip: _____

AGREEMENT

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time, and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Signature: _____

Date: _____

Print Name: _____

Title: _____