

## ACH Authorization Agreement

Date: \_\_\_\_\_

Station Number: \_\_\_\_\_

Station Name: \_\_\_\_\_

Printed Name of Authorized Signer: \_\_\_\_\_

Station Location: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

On behalf of the Station listed above I hereby authorize Systech International, LLC to initiate electronic entry to and to debit the following designated checking account. ACH will be initiated monthly on net 20 payment terms whenever there is an invoice due.

This authorization is to remain in full force and effect until Systech International, LLC has received written notification from me of its termination in such time and in such manner as to afford Systech International and Depository a reasonable opportunity to act on any new or substitute authorization.

I also authorize my financial institution to accept any correction or adjustment transaction made under this agreement if an error has been made. I also understand that the financial institution at which I have the designated account is required to provide to me the procedures for resolving errors on entries made under this agreement.

I hereby hold Systech International, LLC harmless from any liability except for loss of funds transferred to an account not designated in the ACH Authorization Agreement in force at the time of transfer.

Transit Routing Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Account Number Information (Must Be Valid DDA Account)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Please attach a voided check for this designated account)

Authorized Signature: \_\_\_\_\_

(Account Owner)