



ACH Debit Approval Program

This new program allows payment by phone, email, or fax. Please provide the following information:

Payor Name: ______

Order/Invoice #: _____

Amount to be debited: ______

Payor Bank Account Type:	Checking	Savings
/ //	0	

Payor Bank Account #:

(This is the checking or savings account number from which the collection will be debited – usually the third set of numbers at the bottom of the check)

Payor Routing #: _____

(This is the 9-digit numeric code used by the American Bankers Association – ABA – to identify financial institutions in the US – usually the second set of numbers at the bottom of the check)

Approved by: ______

Please email this form directly to your account manager, fax this form to (847) 679-6449, or call our accounting department at (800) 888-2991.

Thank you for your business!