

CHARLES STEWART

AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBITS)

****WE ARE ONLY ABLE TO TAKE ACH PAYMENTS FROM CORPORATE/BUSINESS ACCOUNTS. WE CANNOT DEBIT A CONSUMER (END USER) ACCOUNT.****

DATE: _____ COMPANY NAME: _____

Account Holder Name: _____

Bank Institution Name: _____

Routing Number: _____

Account Number: _____

Account Type: Checking OR Savings (circle one)

Order #: _____

\$2.00 convenience fee will be
added to all ACH transactions

Payment Amount: _____

Billing Phone: _____

Email: _____

I authorize Charles Stewart Company to electronically debit my account, and if necessary, credit my account for any erroneous debits. I also authorize a \$2.00 convenience fee be added to my payment amount.

Authorized Signature: _____ Date: _____

Printed Name: _____

*We do not keep payment information on file. A new form will have to be filled out for each transaction. *

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