ACH AUTHORIZATION FORM

Client Name (Owner)

Today's Date

Business Name on the Account

Telephone Number (Best)

ACCOUNT INFORMATION

Bank Name: ______ Bank Routing/Transit Number: ______ Bank Account Number: ______ This Authorization is for a: Recurring ACH

COPY OF VOIDED CHECK

(Please attach a copy of voided check)

CUSTOMER AUTHORIZATION TO ACH/DEBIT

Client Authorizes I & S Tax Service LLC to ACH/Debit any recurring Payroll services charges on the above listed account.

Client Signature:	Date:	
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