



## **ACH Agreement Form**

## **Authorization Agreement**

I hereby authorize CW Worldwide to initiate automatic withdrawals from my account at the financial institution named below. I also authorize CW Worldwide to make deposits from this account if a debit entry is made in error.

Further, I agree not to hold CW Worldwide responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in withdrawing funds from my account.

This agreement will remain in effect until CW Worldwide receives a written notice of cancellation from me or my financial institution, or until I submit a new ACH form to the Payroll Department.

	<b>Account Information</b>	
Name of Financial Institution: Routing Number: Account Number:		 ☐ Checking   ☐ Savings —
	Signature	
Authorized Signature (Primary):		Date:
Authorized Signature (Joint):		Date:

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