



**CREDIT AUTHORIZATION AGREEMENT
FOR AUTOMATIC DEPOSITS (ACH CREDITS)**

I (we) hereby authorize ECM Industries LLC to initiate CREDIT entries to the checking account and depository (bank) named below.

COMPANY NAME: _____

PAYMENT TYPE: ACH ELECTRONIC PAYMENT

CITY: _____ STATE: _____ ZIP: _____

BANK'S NAME: _____

BANK TRANSIT/ABA NO: _____ ACCOUNT NO: _____

NAME ON ACCOUNT: _____

ACCOUNT RECEIVABLE EMAIL ADDRESS (1): _____

(1) – upon payment of invoices by ECM Industries LLC via ACH an email will be provided to each vendor summarizing the payment amount and the related listing of invoices paid – to facilitate application of payments and provide notification of funds credited to your account.

This authority is to remain in full force and effect until ECM Industries LLC has received written notification from the above authorizing unit of any changes, and in such manner as to afford ECM Industries LLC a reasonable opportunity to act.

DATE: ___/___/___

NAME (signature): _____

NAME (printed): _____

TITLE: _____

TELEPHONE NO. _____