

Binder E-check Form Small Employer

Group Name _____

Group Number: _____

This form authorizes a one-time payment, which will be entered when accounting processes the group. You do not need to attach a voided check, only fill out the information below. Groups wanting to go on preauthorized withdrawal each month will need to submit the separate Preauthorized Banking Withdrawal Agreement with a voided check.

Check#	Routing #	Checking Account#
00 1099	1 2400494 1	183940 1923

Payment amount _____

Bank name _____

Bank routing number _____

Checking account number _____

Name on the checking account _____

Zip code the checking account statement is sent to _____

Email address to send the receipt to _____
(if no email is available, what is a fax number the receipt can be sent to)

Who authorized the payment _____

Phone number to call if there is a problem with the E-check _____

Sales member who took the information _____