

JaTo Bookkeeping LLC
ACH Payment Authorization Form

I authorize JaTo Bookkeeping LLC to electronically debit my bank account according to the terms outlined below. I acknowledge that electronic debits against my account must comply with United States law.

Terms of billing

Monthly fees for accounting services in the amount of \$ _____ will be debited on the 1st of each month.

Customer bank account information:

Routing Number	Account Number
Name on Account	Phone Number

Account type: Checking Savings
 Consumer Business

This payment authorization is to remain in effect until I, _____, notify
Customer name

JaTo Bookkeeping LLC of its cancellation by giving written notice (via email to: jamie@jato-bookkeeping.com) in enough time for JaTo Bookkeeping LLC and the receiving financial institution to have a reasonable opportunity to act on it. I further agree to notify JaTo Bookkeeping LLC in writing of any changes in my account information at least 15 days prior to the next billing date. If the 1st of the month falls on a weekend or holiday, I understand that payment may be executed on the next business day. I certify that I am authorized on the bank account listed above and will not dispute these scheduled transactions, so long as the transactions correspond to the terms indicated in this authorization form.

Customer Signature	Company Name	Date
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