



1087 West 6 Mile Rd., Sault Ste. Marie, MI 49783  
 Main # (866) 977-3835 | Fax # (877) 428-6814  
 www.walshservicesolutions.com

Master Account Number	Sales Representative
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DATE RECEIVED:

**EFT AUTHORIZATION**

Thank you for your interest in Walsh Service Solutions (Walsh), an SBA certified Service Disabled Veteran Owned Small and HUBZone Business, and an ISBEE Certified Native American Owned Business. We look forward to the opportunity to service your needs and account. Please take the time to completely fill-out this form so that Walsh can meet all of your needs. CUSTOMER hereby authorizes Walsh, hereinafter called COMPANY, to initiate debit and credit entries to the checking account indicated below and the bank named below, hereinafter called BANK, to debit and credit the same to such account for the purposes of payment of product invoices in accordance with the payment terms of the invoice. CUSTOMER has the right to stop payment of a debit entry by notification to the BANK prior to charging account.

**PLACE COPY OF VOIDED CHECK HERE**

BANK INFORMATION:			
BANK NAME		BRANCH	
BANK ADDRESS	CITY	STATE	ZIP
BANK ROUTING NUMBER			
BANK ACCOUNT NUMBER			
BANK ACCOUNT TYPE <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> OTHER: _____			
VERIFIED	VERIFIED BY	TEST DATE	TESTED BY

This authority may be terminated upon thirty days written notice of its termination from CUSTOMER to the COMPANY. A copy of this form may be forwarded to your BANK.

CUSTOMER \_\_\_\_\_ SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

TITLE \_\_\_\_\_ FEDERAL TAX ID \_\_\_\_\_ NAME PRINTED \_\_\_\_\_