



E-Check Authorization Form

ONE TIME E-CHECK AUTHORIZATION

_____ *Initial here if you would like Supply Bright, LLC to use this E-Check authorization form for a one time service or product transaction.*

I authorize Supply Bright, LLC initiate either an electronic debit or to create and process a demand draft against my bank account on or after _____ (mm/dd/yyyy) for the amount of _____. I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law. My account information is shown near the bottom of this page.

RECURRING E-CHECK TRANSACTION

_____ *Initial here if you would like Supply Bright, LLC to use this E-Check authorization form for a recurring service or product.*

I authorize Supply Bright, LLC to initiate either an electronic debit or to create and process a demand draft against my bank account according to the terms listed below. I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law. My account information is shown near the bottom of this page. This payment authorization is to remain in full force and effect until I, _____ (name) notify Supply Bright, LLC of its cancellation by sending written in such time and in such time to allow both the Supply Bright, LLC and the receiving financial institution a reasonable opportunity to act on it.

BANK INFORMATION

Bank ABA Number (Your Banks Routing Number) _____

Bank Account Number: _____

Bank Account Type (Checking, Savings, Business Checking) _____

My Phone Number (as recorded with this bank account) _____

Your Signed Name _____

Your Printed Name: _____

Date: _____