## **ACH Debit Authorization Form**

Authorized Business Name Authorized Business Name 1320 19th Street, NW Suite 200 Authorized Business Address City  Account Holder Information  Account Holder Information  Account Holder Name Account Holder Business Name (if business account) Account Holder Name Account Holder's Bank Information  Account Holder's Bank Name Branch City ST Zip  Bank Routing Number (9 digits) Bank Account Number How to find your Routing and Account Numbers on a check  Payment Information  Psychotherapy Description/Goods Purchased/Services Rendered  Frequency: One-Time Payment Date First Payment Date Amount of Payment Frequency: Weekly Bi-weekly Monthly Annually  Authorization
Authorized Business Name  1320 19th Street, NW Suite 200 Authorized Business Address City  Account Holder Information  Account Holder Name Account Holder Samk Information  Account Holder's Bank Information  Account Holder's Bank Information  Account Holder's Bank Information  Account Holder's Bank Name Branch City  ST Zip  Account Holder's Bank Name Branch City  ST Zip  Account Holder's Bank Name Branch City  Bank Routing Number (9 digits) Bank Routing Number (9 digits) Bank Account Number Bank Routing Number (9 digits) Bank Account Number on a check  Payment Information  Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency: Payment Date First Payment Date Amount of Payment Frequency: Weekly Bi-weekly Annually Annually Annually Annually
Account Holder Information  Account Holder Name
Account Holder Information  Account Holder Name
Account Holder Name
Account Holder Name
Account Holder's Bank Information  Account Holder's Bank Information  Account Holder's Bank Name  Branch City  Bank Routing Number (9 digits)  Bank Routing Number (9 digits)  Bank Routing Ode Bank Account Number  How to find your Routing and Account Numbers on a check  Payment Information  Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency: One-Time Recurring  Payment Date First Payment Date Number of Payments  Amount of Payment  Amount per Payment  Frequency: Weekly Bi-weekly Monthly Annually
Account Holder's Bank Information  Account Holder's Bank Information  Account Holder's Bank Name  Branch City  Bank Routing Number (9 digits)  Bank Routing Number (9 digits)  Bank Routing Ode Bank Account Number  How to find your Routing and Account Numbers on a check  Payment Information  Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency: One-Time Recurring  Payment Date First Payment Date Number of Payments  Amount of Payment  Amount per Payment  Frequency: Weekly Bi-weekly Monthly Annually
Account Holder's Bank Name  Branch City  ST Zip  Bank Routing Number (9 digits)  Bank Account Number  Branch City  Bank Routing Number (9 digits)  Bank Routing Number (9 digits)  Bank Routing Number (9 digits)  Bank Account Number  Personal Checking Personal Check
Account Holder's Bank Name  Branch City  ST Zip  Bank Routing Number (9 digits)  Bank Account Number  How to find your Routing and Account Numbers on a check  Payment Information  Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency:  One-Time  Payment Date  First Payment Date  First Payment Date  Amount of Payment  Frequency:  Weekly  Guarterly  ST Zip  Account Type:  Business Checking  Personal Checking  Savings  Personal Checking  Savings  Poersonal Checking  Payment Description/Goods Purchased/Services Rendered  Frequency:  One-Time  Recurring  Payment Date  First Payment Date  Number of Payments  Amount of Payment  Frequency:  Weekly  Bi-weekly  Monthly  Annually
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Bank Routing Number (9 digits)  Bank Account Number  Bank Routing Code Bank Account Number  How to find your Routing and Account Numbers on a check  Payment Information  Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency:  One-Time Payment Date First Payment Date Number of Payments  Amount of Payment Frequency:  Weekly Bi-weekly Monthly Semi-annually  Monthly Semi-annually
Personal Checking Bank Routing Code Bank Account Number How to find your Routing and Account Numbers on a check  Payment Information  Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency: One-Time
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Bank Account Number
How to find your Routing and Account Numbers on a check  Payment Information  Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency: One-Time
Payment Information  Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency: One-Time
Psychotherapy  Description/Goods Purchased/Services Rendered  Frequency: One-Time Recurring or Open Ended Payment Date First Payment Date Number of Payments or Variable Amount Amount of Payment
Payment Date
Frequency: One-Time Recurring or Open Ended
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Payment Date First Payment Date  Summer of Payments  Summer of Paymer of Paymer of Pay
Payment Date First Payment Date Number of Payments  or Variable Amount  Amount of Payment Frequency: Weekly Bi-weekly Monthly  Quarterly Semi-annually Annually
Amount of Payment  Frequency: Weekly Bi-weekly Monthly  Quarterly Semi-annually Annually
Amount of Payment  Frequency: Weekly Bi-weekly Monthly  Quarterly Semi-annually Annually
Quarterly Semi-annually Annually
Quarterly Semi-annually Annually
Authorization
Authorization
Single Use
I hereby authorize the above named Business to Debit the Bank Account referenced herein, via the Automated Clearing House system, according to the parameters specified herein. This authority will remain in effect until the payment(s) are completed as specified herein. If a
payment is returned for any reason I acknowledge that I am subject to a rejected item fee of \$25 or the maximum amount allowed by law.
Until Revoked
I hereby authorize the above named Business to Debit the Bank Account referenced herein, via the Automated Clearing House system. This authority will remain in effect until revoked in writing by the undersigned account holder. If the payment is returned for any reason I
acknowledge that I am subject to a rejected item fee of \$25 or the maximum amount allowed by law. You may void this authorization at any time
by contacting your bank. *
Signature of Account Holder Print Name of Account Holder Date

Pathfinder

ACH Processing Provided by

\*Also subject to \$4 rejected item fee from Keith Miller Counseling, LLC