



**AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBIT)
CONSUMER AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBITS)**

Direct Payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment.

I (we) _____ authorize Carolina Made, Inc to electronically debit my (our) account (and, if necessary, electronically credit my (our) account to correct erroneous debits¹) as follows:

☐ Checking Account / ☐ Savings Account (select one) at the depository financial institution named below. I (we) agree that ACH transactions I (we) authorize comply with all applicable law.

This is a ☐ Business Account/ ☐ Personal Account (Select one)

Company Name _____

Depository Name (Financial Institution) _____

Routing Number _____ Account Number _____

Date(s)/frequency and/or Amount of debit(s):

___ Recurring, every _____ for a range of _____

___ On the date of each invoice for full invoice amount _____

___ For any past due balance

___ One time authorization for _____

___ Per phone or email authorization

I (we) understand that this authorization will remain in full force and effect until I (we) notify Carolina Made, Inc. in writing, that I (we) wish to revoke this authorization. I (we) understand that Carolina Made, Inc. requires at least 1 week prior notice in order to cancel this authorization.²

Name(s) _____

(Please Print)

Date _____ Signature(s) _____