



One Time ACH Payment Authorization Form

Sign and complete this form to authorize CheckWare WorkStations, LLC to make a one-time debit from your bank account for the Total Purchase Amount listed below.

By signing this form you give CheckWare WorkStations, LLC permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Total Purchase Amount: \$ \_\_\_\_\_ \*\*including any taxes or fees\*\*

Account Type:  Business Checking  Personal Checking  Savings

Name on Account: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Attach Voided Check Here

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.