

## **ACH Authorization Form**

**Please submit a completed copy of this form with a bank verification letter or voided check to:** GSNWGL, Attn: ACH/Finance, 4693 North Lynndale Drive, Appleton, WI 54913, or FAX to 920.734.1304. Questions? Contact the GSNWGL finance department at 888.747.6945. **IMPORTANT: DO NOT EMAIL** ACH Authorization Forms or bank account information due to potential internet security risks. If forms are emailed, the council is not responsible for fraud.

TROOP #:	_ SERVICE AREA NAM	E and #:		
BANK INFORMATION:				
Name of Bank/Financial Inst	tution:		Account Type: 🗆 Ch	ıecking □ Savings
Name of Bank Account:(as it appears on check or bank state	ment)			
Bank City:	Bank State:	Bank Zip:	Bank Phone:	
Routing Number:		Account Number:		
□ I have included a verificat voided check, to verify the ac				e example), or a
SIGNER INFORMATION:				
Primary Name on Account: _		Emai	1:	
Address:		City:	State:	_Zip:
Day Phone:		Evening Phone:		
	protou suongi ounu ono			
Initials:				
I authorize Girl Scouts of account(s) listed above.	f the Northwestern Great L	akes (GSNWGL) to ini	itiate credit and/or debit e	ntries to the
I understand that no per	sonal purchases may be ma	ade using the troop ac	count or troop funds.	
I understand that theft	or intentional misuse of fun	ds may result in crimi	nal charges being filed.	
	d any investigation firms it on including, but not limited ify the appropriate use of t	l to, names of account	signers, statements/trans	
I will notify the council	of any changes to this inform	mation by submitting	an updated ACH Authoriza	ation Form.
I understand this author the wish to revoke this a	rization will remain in full four the state of the second se	orce and effect until ar	n authorized signer has sul	omitted in writing
By signing, I agree to the term	ns outlined above:			

Signature: \_\_\_\_

Date:

## Here's a sample of a bank/financial institution verification letter. Ensure the bank includes all nine pieces of information on their letterhead.

1	Letterhead/Logo
2	Bank/Financial Institution Name & Address
3	Date
I	To GSNWGL, ACH/Finance:
4	I attest that and are authorized signers on the account listed below:
5	Account Name: Girl Scouts of the Northwestern Great Lakes - Troop ####
6	Account Type:  Checking  Savings
7	Routing Number:
8	Account Number:
-	Sincerely, Signature of Bank/Financial Institution Representative & Title