

Ashland Childcare Center, LLC

701 E. Liberty Lane
Ashland, MO 65010

ACH Recurring Payment Authorization Form

Schedule your payment to be automatically deposited to your checking or savings account.
Just complete and sign this form to get started!

Here's How ACH Deposits Work:

You authorize regularly scheduled deposits to your checking or savings account.

Please complete the information below:

I _____ authorize **Ashland Childcare Center, LLC** to deposit
(full name)
or credit my bank account indicated below on the scheduled payroll date each period. If an error would occur,
I also approve a debit to transact to my account.

Address _____

Phone# _____

City, State, Zip _____

Email _____

Account Type: ☐ Checking ☐ Savings

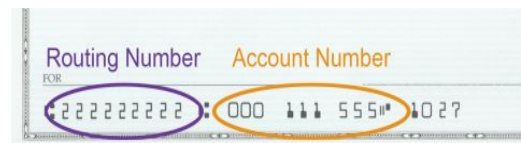
Name on Acct _____

Bank Name _____

Account Number _____

Bank Routing # _____

Bank City/State _____



SIGNATURE _____

DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Adventures In Learning Childcare Center, LLC in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date.