



**Birch Management, Inc. Client ACH Authorization Agreement**

I (We) hereby authorize Birch Management, Inc., herein after called Company, to initiate automatic deposit entries and/or corrective entries to my (our) bank account indicated below at the depository institution named below, herein called Depository, to credit the same such account. I (we) acknowledge that the origination of ACH transaction to my (our) account must comply with the provisions of the United States law.

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**Please complete the information below:**

Client Name: \_\_\_\_\_  
Account Code: \_\_\_\_\_ (Company Use Only)

**Deposit Account Information**

Account Type:  Checking  Savings

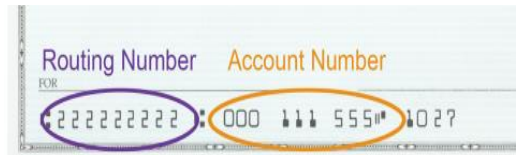
Name on Account: \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank City/State: \_\_\_\_\_

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

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



This authorization is to remain in full force until Company has received written notification from me (or either of us) of its termination in such time (minimum of 10 business days) and in such manner as to afford Company and Depository reasonable opportunity to act upon it.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Please attach a copy of voided check (no deposit tickets) below**