



**AUTHORIZATION AGREEMENT FOR ACH DEBIT  
COMPANY**

We hereby authorize Alliance HR, LLC to initiate debit entries to our company Checking Account, from the Depository indicated below.

**FINANCIAL DEPOSITORY**

NAME \_\_\_\_\_ BRANCH \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BANK PHONE \_\_\_\_\_

TRANSIT/ABA # \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

ACCOUNT NAME: \_\_\_\_\_

This authority is to remain in full force and effect until either Alliance HR, LLC has received written notification from our Company of its termination in such time and in such manner, as to afford Alliance HR LLC, and the Originating Financial Institution a reasonable opportunity to act on it.

COMPANY NAME: \_\_\_\_\_ TAX ID #: \_\_\_\_\_

AUTHORIZED SIGNER: \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_