

***Electronic Funds Transfer  
Authorization Form***

1. **I the undersigned, certify** that I am a signer on the account listed below with the authority to grant this authorization.
2. **I the undersigned, certify** that Trimark USA, LLC or any agents of Trimark USA, LLC is authorized to debit the account referenced below via draft (ACH) or other Electronic Funds Transfers (EFT).
3. **I the undersigned, certify** that the bank referenced below is hereby requested, authorized and directed to honor and treat as authorized, checks, drafts or moneys drawn in my name in accordance with this authorization.
4. **I the undersigned, certify** that in the event any such draft or EFT is returned unpaid, I agree to have the account referenced below debited electronically or otherwise drafted for an item fee of \$30, plus any applicable taxes.
5. **I the undersigned,** ☐ (if checked) **authorize** Trimark USA, LLC to initiate recurring EFT drafts on the account to pay outstanding balances and obligations as they become due.
6. **I the undersigned, certify** that this authorization shall remain in effect and the authority herein given to Trimark USA, LLC shall remain irrevocable until Trimark USA, LLC receives written notice of revocation of such authority. Revocation shall not affect any action taken prior to receipt of such notice.

Customer/Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

ABA/Transit Routing # : \_\_\_\_\_ Account Number: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_