



## ACH Payment Authorization Form

I authorize J2Bookkeeping LLC to electronically debit my bank account according to the terms outlined below. I acknowledge that electronic debits against my account must comply with United States law.

### Terms of billing

Monthly fees for accounting services in the amount of \$600.00 will be debited on the **1<sup>st</sup> of each month** starting June 1<sup>st</sup>.

A one-time debit of \$1,142.00 (\$500 for the onboarding and \$642 for May bookkeeping) will be withdrawn when this form is executed and received per the engagement agreement if indicated.

### Customer bank account information:

_____	_____
Routing Number	Account Number
_____	_____
Name on Account	Account Phone Number

Account type:

This payment authorization is to remain in effect until I, \_\_\_\_\_, notify **J2Bookkeeping / Jimmie Needles** of its cancellation by giving written notice (via email to: [support@j2bookkeeping.com](mailto:support@j2bookkeeping.com)) in enough time for **J2Bookkeeping** and the receiving financial institution to have a reasonable opportunity to act on it. I further agree to notify **J2Bookkeeping** in writing of any changes in my account information **at least 15 days before** the next billing date. If the 1<sup>st</sup> of the month falls on a weekend or holiday, I understand that payment may be executed on the next business day. I certify that I am authorized on the bank account listed above and will not dispute these scheduled transactions, so long as the transactions correspond to the terms indicated in this authorization form.

_____	_____	_____
Customer Signature	Company Name	Date