



**eCheck.Net Recurring Transaction
Payment Authorization Form**

Automatic withdraw from business checking account

I, _____, authorize ADI Business Solutions to charge my
Customer's name

_____ starting on _____ and on the _____ of each
Bank account type Month, day, year day of the month
month following through _____ for the amount of _____ for Support.
Month, day, year dollar amount

My account information is as follows:

Bank Name: _____
Name of the customer's bank

Bank ABA Routing Number: _____
Customer's bank's ABA routing number

Bank Account Type: _____
Checking, business checking, savings

Bank Account Number: _____
The customer's bank account number

This payment authorization is valid and to remain in effect unless I,

_____ notify ADI Business Solutions of its cancellation by sending written notice.
Customer's name

Customer's name customer's signature title and date

****Please enclose a voided business check****

**Automated Data Instruments Corp DBA ADI Business Solutions
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