



Integrated Tax Consultants, LLC

Service. Integrity. Solutions.

# ACH Payment(s) Authorization

## Authorization Agreement

I hereby authorize Integrated Tax Consultants, LLC (ITC) to charge the following bank account, for all invoices for charges related to the services below, rendered on behalf of :

Entity Name/Client Name: \_\_\_\_\_

## Services

Bookkeeping  Quickbooks Software (QBO)  Payroll  Sales Tax   
 1099  Annual Report  Tax Return  Financial Reporting   
 CFO  Consulting  (MMJ only)

## Account Information

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

Name on the Bank Account: \_\_\_\_\_

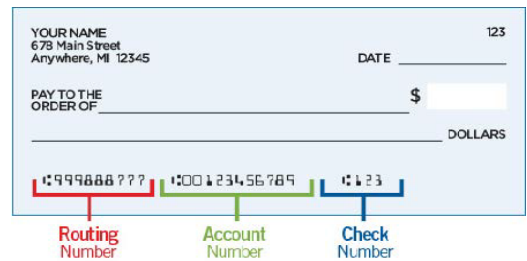
Account Number: \_\_\_\_\_

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

Amount Agreed Contract Rates

Checking

Savings



## Signature

SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_

(Account Holder's Signature)

SIGNER'S NAME: \_\_\_\_\_

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify ITC in writing of any changes to my account information or termination of this authorization at least 30 days prior to the next billing date. In case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF), I understand that ITC may, at its discretion, attempt to process the charge again within 30 days and I agree to an additional \$25 charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I certify that I am an authorized user of this bank account and will not dispute these scheduled transactions with my bank.

RETURN BY FAX TO 888-603-5188

RETURN BY MAIL TO 358 US ROUTE 1, SUITE 101 | FALMOUTH, ME 04105

RETURN VIA SECURE CLIENT PORTAL AT ITCTAXES.COM