

eCheck Payment Authorization

Please fill out form completely, sign, date and fax to 937-693-5070. All invoice inquiries should be directed to servicing branch. For inquires regarding this authorization or Accounts Receivable, please call 937-693-5000.

Date: _____

I, _____ (Your name) authorize **KOENIG EQUIPMENT, INC** to charge my banking account listed below, starting on _____ (today's date) for the amount of \$ _____ (min. \$1.00, max. \$15,000) for payment of my account number _____ (located on your statement or invoice).

My account information is as follows:

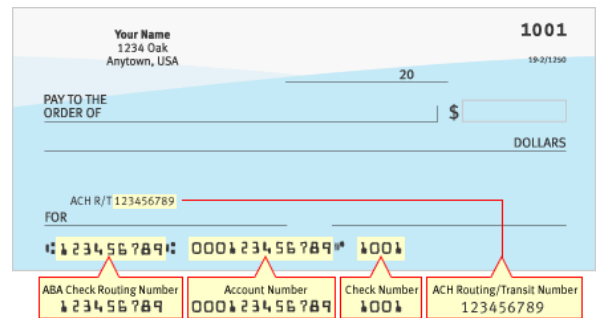
Bank Name: _____

Bank Account Type: Business Checking Personal Checking Savings

Bank ABA Routing Number: _____

Bank Account Number: _____

How do I find my routing and account numbers?
 Refer to the check image to the right ----->



Customer Name Printed

Customer Signature

Date