|  |  |
| --- | --- |
| **Agent Name:** |  |
| **Accounting:** |  |
| **Accounting Manager:** |  |

**Bank ACH Request**

|  |  |
| --- | --- |
| **Date Authorized:** |  |
| **Tour/Client Number:** |  |
| **Client Name on Acct:** |  |
| **Bank Name:** |  |
| **Bank Routing Number:** |  |
| **Client Acct Number:** |  |
| **Amount to Withdraw:** |  |

**\*\*\*\* Please fill out in this Word document. Do not hand write.**

**Form is sometimes hard to read if its handwritten. Thanks. \*\*\*\***