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decorativeconceptsllc.com

ACH Authorization Form

Please print and complete the following authorization:

Name On Account: _____

Bank Name: _____

Billing Address: _____

Bank Account Type: ☐ **Checking** ☐ **Savings**

Bank Account Number: _____

Bank Routing Number: _____

I authorize Decorative Concepts LLC, to charge the above Bank Account for Invoice Number _____.

Name (Printed): _____

Signed: _____

Dated: _____

_____ **Please initial if you would prefer to have your ACH information placed on file.**

Please fax or email ACH authorization form to accounting@decorativeconceptsllc.com. This ACH authorization form dated 2/01/20 supersedes all prior forms.

2/01/20