



DIRECT DEPOSIT FORM

Authorization Agreement for Direct Deposits (ACH Credits)

Vendors may only set up one checking account for direct deposit per CPI account. Fill out the account designation information below including routing number, account number, and attached a voided check.

The routing number is a 9-digit number at the bottom left of your check.



NOTE: Requests for direct deposit must allow sufficient time for processing.

CHECKING ACCOUNT INFORMATION * Required Information
*Bank Name: _____
*Bank City, State: _____
*Routing # (9 digits) _____ *Account # _____
*Email Address: _____

Authorization Agreement: I (we) hereby authorize Cooperative Producers, Inc. to initiate credit and/or debit entries to my (our) account named above. This authorization is to remain in full force and effect until I have given written notice that I am terminating it, until Cooperative Producers, Inc. has notified me that this deposit service has been discontinued, or until a lien has been placed on my account. I understand I must give advance notice and allow reasonable time for my instructions to be executed. If an incorrect deposit should be made into my account(s), I authorize my bank and Cooperative Producers Inc. to make the appropriate adjustment(s).

Customer ID Number: _____

Vendor Name (Please Print): _____

Vendor Signature: _____ **Date:** _____

ATTACH COPY OF VOIDED CHECK