ACH PAYMENT AUTHORIZATION

Allowing SCCA to directly deposit payment into your account saves you time and guarantees faster delivery. If you are interested in this service, please fill out this form and return it to the address listed below.

NAME: _____

BANK NAME: _____

CHECKING _ **SAVINGS** _

BANK ROUTING NUMBER: _____

BANK ACCOUNT NUMBER: _____

EMAIL ADDRESS *(for notification of deposit):* _____

I hereby authorize SCCA to make electronic fund transfers to the above account:

SIGNATURE: _____ **DATE:** _____

Please return to: SCCA
Accounts Payable
6620 SE Dwight St
Topeka, KS 66619
Attn: Amanda Forbach

Or Email to: accountspayable@scca.com