



Fax this form back to the Financial Services Department at **734.429.1064**

Customer Name \_\_\_\_\_

Estimate / Invoice Number \_\_\_\_\_

Dollar Amount \_\_\_\_\_

Account Type: *Business / Personal* \_\_\_\_\_

Bank Name \_\_\_\_\_

Routing Number \_\_\_\_\_

Account Number \_\_\_\_\_

Account Type: *Checking / Savings* \_\_\_\_\_

If you have any questions, please call Jill Esch 734.429.8710,  
or Carlene Rogers 734.429.8711.

If payment pertains to a deposit, please include estimate number.

You may attach a voided check instead of entering the above information on this form.

I am a signer on the above account and I authorize McNaughton & Gunn Inc. to withdraw the above amount from my bank account.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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# ACH Withdrawal Authorization Form