



AVM
ENTERPRISES, INC.

P.O. BOX 22283
CHATTANOOGA, TN 37422-2283
PHONE (423) 847-4700
FAX (423) 847-4701

AUTHORIZATION AGREEMENT FOR DIRECT DEBIT (ACH DEBIT)

Customer Information	Please Print
Customer Name	
Address	
City, State Zip	
Customer ID #	

AVM Enterprises, Inc. will process your check, sent to via facsimile, as if it were received by ordinary means. Please follow these instructions and sign the authorization.

Instructions:

1. Prepare your check as you normally would, made payable to AVM Enterprises, Inc.
2. Make sure that you have indicated which invoices are to be paid on this form.
3. Note the total of the check on this form.
4. Sign this form and make sure the check is signed as well.
5. Provide Phone and E-Mail information for easy contact, in the event questions arise.
6. Fax this form along with your check to **800-518-5528**.
7. If you must affix the check to a sheet of paper to fax it, do not cover any part of the check face.
8. **DO NOT MAIL YOUR CHECK. Simply retain it for your records.**

Complete Below:

	Information
Routing #	
Account #	
Please Indicate	<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account
Invoice or Order #	
Amount :	\$

Customer Authorization:

I hereby authorize AVM Enterprises, Inc. to immediately process my check, sent via fax as an electronic payment.

Authorized Signature _____ Date _____

So that we can easily contact you in the event that we have a question regarding this transaction, please provide both your phone number and an e-mail address.

Phone Number _____ E-Mail Address _____

To protect your privacy, this form must be returned to 800-518-5528