

ACH Authorization Form

ATHORIZATION FORM

ACH will be processed for the one-time payment.

I (we) hereby authorize Paragon Cattle Services (the company) to initiate entries to my (our) checking/savings account at the financial institution listed bellow and if necessary, initiate adjustments for any transactions credited/debited in error.

(Name of Financial Institution)

(Address of Financial Institution - Branch, City, State, & Zip)

Signature

Date: _____

(Name - PLEASE PRINT)

(Address - PLEASE PRINT)

Set Amount: \$ _____

Financial Institution Routing Number: _____

Checking/Savings Account Number: _____