

GREATER HOUSTON RETAILERS COOPERATIVE ASSOCIATION, INC.
12790 SOUTH KIRKWOOD ROAD, STAFFORD, TX 77477
OFFICE: 281-295-5300 FAX: 281-295-5399

AUTHORIZATION FORM FOR AUTOMATIC DEPOSITS (ACH CREDITS/DEBITS)

ACH INFO FOR: (PLEASE CHECK ONE BOX)

GHRA CORPORATE

GHRA WAREHOUSE

BOTH

Company Name / DBA Name

GHRA Number

Store Address

City

State

Zip

Email Address

I _____, hereby authorize Greater Houston Retailers Cooperative Association, Inc. (GHRA),
(Authorize Representative Name)

Hereinafter called GHRA, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account listed and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

Bank Name

Branch Address

City

State

Zip

Transit/ABA Number

Account Number

This authority is to remain in full force and effect until GHRA has received written notification from the member of its termination in such time and in such manner as to afford GHRA and DEPOSITORY a reasonable opportunity to act on it.

Printed Full Name of Authorized Representative

Texas Driver's License #

Signature of Authorized Representative

Date

Staple Void Check here of your Corporation / DBA

Please do not attach a personal check or a check copy. Only original check will be accepted.