

## ACH (Automated Clearing House) Instructions:

1. Please fill out the highlighted fields
  - a. Name of your bank
  - b. The address is your banks address
  - c. Enter the Routing and Account number usually found on your checks

### Sample Check

The image shows a sample check form with the following details:

- Payor: TONY MAPLE, JENNIFER MAPLE, 123 Pear Lane, Anyplace, GA 00000
- Payee: PAY TO THE ORDER OF \_\_\_\_\_
- Amount: \$ \_\_\_\_\_ DOLLARS
- Bank: ANYPLACE BANK, Anyplace, GA 00000
- Routing number: 250250025 (circled and labeled "Routing number")
- Account number: 20202086 (circled and labeled "Account number")
- Check number: 1234 (circled and labeled "Do not include the check number.")
- Microprint: 15-000000000

2. Select whether it's a checking or savings account **AND** if its Personal or Business
3. **PRINT** the document and then **Date** and **Sign** it.
4. Attach a copy of a blank check and a Government Issued ID (only needed for your first ACH)
5. Send it back to us via email or fax:
  - a. Scan (PDF or JPEG works) and email it to [services@itmtrading.com](mailto:services@itmtrading.com) or
  - b. Fax to 602-404-3917

If you have any questions, please feel free to give us a call at 800-846-2577

**ITM Trading, Inc.**  
11201 N Tatum Blvd, Ste. 250  
Phoenix, AZ 85028  
P: 800-846-2577  
F: 602-404-3917  
services@itmtrading.com



"I (we) hereby authorize ITM Trading, Inc., to initiate debit entries to my (our) Checking/Savings accounts at the depository financial institution named below, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of the U.S. law."

**YOUR ACCOUNT INFORMATION**

Bank Name \_\_\_\_\_ Bank Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

**ACCOUNT TYPE: (Circle One)**

Checking  
Savings

**PERSONAL OR BUSINESS: (Circle One)**

Personal Account  
Business Account

**YOUR NAME & SIGNATURE**

This authorization is to remain in full force and effect until ITM Trading, Inc. has received written notification from me (or either of us) of its termination in such time and in such manner as to afford ITM Trading, Inc. and DEPOSITORY a reasonable opportunity to act on it.

Name(s) \_\_\_\_\_ Name (s) \_\_\_\_\_  
(Please Print Name)

Date \_\_\_\_\_

Signature(s) \_\_\_\_\_

Note: Debit authorizations must provide that the Receiver may revoke the authorization only by notifying the Originator in the manner specified in the authorization. ITM Trading, Inc. is only authorized to debit the account above such funds as specified by a specific order placed online or over the telephone.

