



ACH Authorization Form

Business Info

Business Name	
Business Address	
Phone	
Email	

Bank Info

Bank Name	
Bank Address	
Account Type (Checking or Savings)	
Routing #	
Account #	

Authorization

I authorize GSG AVERIGO LLC to deposit funds to the account listed above.

Signature _____

Name _____

Date _____

Fill out, sign & send scanned document to accounts@averigo.com