



### ACH Payment Decline Form

**Vendor Name:** \_\_\_\_\_

1099 Info (US only) Social Security -or- **Federal Tax Id #:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Contact Phone #:** \_\_\_\_\_ **Contact e-mail:** \_\_\_\_\_

I decline ACH payments at this time. I acknowledge that check payments will be slower due to mailing times, and that funds may not immediately be considered good funds by my financial institution when deposited.

**Authorized Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_