1. _____ Terminal Number (Change or Delete only)

2. ____/____/____ Effective Date

Money Machine
ACH AUTHORIZATION RELEASE

3. ☐ ADD ☐ DELETE ☐ CHANGE ☐ EXPEDITE ($25.00)

4. **This form serves as an attachment to:**

☐ Terminal Profile ☐ Income Distribution ☐ Fee Billing Request

5. Customer Account # _____

6. Customer Name: Money Machine LLC

7. Legal Business Name of Terminal Location _____

8. Physical Address of Terminal _____

9. City _____ State _____ Zip _____

The undersigned authorizes Money Machine to credit or debit its account for the following items:

- **DAILY TRANSACTION SETTLEMENT**
- **SETTLEMENT ERROR CORRECTIONS**
- **ADJUSTMENTS**
- **FEES**
- **INCOME DISTRIBUTION**

The credits and debits pursuant to this agreement will be effected through the Federal Reserve automated clearing house system.

SETTLEMENT ACCOUNT INFORMATION

*****This form MUST be accompanied by a Printed Voided Check or Bank Letter*****

10. Financial Institution Name _____

11. Street Address _____

12. City _____ State _____ Zip _____

13. Phone (____) _____ Fax (____) _____

14. Business Name as it Appears on Account _____

15. Routing and Transit Number (9 digits) _____ Account Number _____

16. Account Type: Checking Account ☐ Savings Account ☐

17. **Change Orders Only**

Old Routing and Transit Number (9 digits) _____ Old Account _____

18. **Has the account owner changed?** ☐ **Yes** ☐ **No**

Undersigned represents and warrants to Money Machine that the person executing this Release is an authorized signatory on the Account referenced above and all information regarding the Account and the Account Holder is true and correct.

19. Account Owner Signature _____ 20. Date ____/____/____

21. Print Name and Title _____

FOR Money Machine's USE ONLY

Date Received: ____/____/____ Entered By: _____

Date Entered: ____/____/____ Verified By: _____

Revised 3/7/00