



## eCheck Authorization Form

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I authorize Marmiro Stones Inc. to initiate either an electronic debit or to create and process a demand draft against my bank account according to the terms outlined below. I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law.

### Terms of Billing

One time on \_\_\_\_\_ for the amount of \_\_\_\_\_.

### Bank Information

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Account Type: \_\_\_ Checking \_\_\_ Savings, \_\_\_ Consumer \_\_\_ Business

This payment authorization is to remain in full force and effect until I, \_\_\_\_\_, notify Marmiro Stones Inc. of its cancellation by sending written notice in such time and in such manner to allow both Marmiro Stones Inc. and the receiving financial institution a reasonable opportunity to act on it.

Customer Signature: \_\_\_\_\_

Customer Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_