

ACH/BANK INFORMATION FORM

Bring this form and your volunteer approval letter to the bank with you. ***It is mandatory that one volunteer be responsible for signing checks, and the other volunteer will receive bank statements and correspondence.*** Your bank will require proper identification from each signer to open your account. Fill in your troop number for the bank in the space provided below.

INFORMATION FOR BANK PERSONNEL

Girl Scouts of Ohio's Heartland requires two unrelated co-signers for each troop account. Signers must be approved, trained, and registered Girl Scout volunteers. Please open the account in the name of Girl Scouts of Ohio's Heartland, Inc., Troop # _____, and use the Girl Scouts of Ohio's Heartland Tax I.D. number 31-4379475

If further information is needed, please contact the GSOH Chief Administrative Officer, Maureen Thomas, at 800.621.7042.

AUTHORIZED SIGNATURES

SIGNER #1 *(This person will receive the bank statements)*

Name _____ Phone _____

Address _____

City _____ State _____ ZIP _____

Email _____ Cell Phone _____

SIGNER #2 *(This person will sign checks)*

Name _____ Phone _____

Address _____

City _____ State _____ ZIP _____

Email _____ Cell Phone _____

THE BACK SIDE OF THIS FORM MUST BE COMPLETED OVER >>

AUTHORIZATION AGREEMENT FOR AUTOMATED CLEARING HOUSE TRANSACTIONS (ACH)

I (we) hereby authorize Girl Scouts of Ohio's Heartland, hereinafter called GSOH, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit and/or credit the same to such account.

PLEASE ATTACH COPY OF VOIDED CHECK HERE
If troop only has a Savings Account, please attach a letter from the bank providing the bank's ABA routing number and your savings account number to this form.

Depository (Bank) Name _____ Branch _____

City _____ State _____ ZIP _____ Phone _____

ABA ROUTING NO. _____ ACCOUNT NO. _____

PLEASE CIRCLE which type of account the troop has: Checking Acct. Savings Acct.

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

I (we) understand that it is my (our) responsibility to notify GSOH if funds will not be available on the specified date, and that if we do not notify GSOH, it may result in fees being assessed to my (our) account due to insufficient funds.

TROOP # _____ SERVICE UNIT _____ DATE _____

SIGNATURE #1

SIGNATURE #2

PRINTED NAME

PRINTED NAME

Please mail form and a copy of voided check to :
Girl Scouts of Ohio's Heartland
Finance Department
1700 WaterMark Drive
Columbus, OH 43215

PLEASE NOTE
Girl Scouts of Ohio's Heartland, Inc., conducts random reviews of troop and service unit bank accounts.