

ACH Authorization Form



As a duly authorized representative of _____ (name of school), I authorize Edlio, LLC., to automatically credit the bank account listed below and debit the account if refunds are needed (as authorized by the school). This authorization is valid until we provide Edlio Pay (OSMS) with written notification terminating this authorization.

School Name: _____

Bank Name: _____

Routing Number: _____

Account Number: _____

A sample check from Edlio Pay (OSMS) for \$2400. The check is light green and features the Edlio logo in the top right corner. The amount is written as '2400' in the top right. The payee is 'PAY TO THE ORDER OF' followed by a blank line. The amount is also written in words as 'DOLLARS'. The check number is '2400' in the bottom right. Below the check, the routing number '122105278', account number '6724301068', and check number '2400' are labeled with lines pointing to their respective positions on the check.

Routing Number: 122105278 Account Number: 6724301068 Check Number: 2400

****Please attach a voided check, if a paper copy of the check is available.***

Authorization Signature

Print Name

Date

E-mail

Phone Number

Please return form via email to helpdesk@osmsinc.com