



Malloy eCheck Authorization Form

*Please fax completed form to Malloy's Credit Department — 734.995.8527
Questions? Please call Marge — 800.722.3231 ext. 530*

CUSTOMER

Customer Name _____
Customer Number _____ (for office use only)

AUTHORIZATION

I authorize Malloy Incorporated to debit my:

Account Type _____ personal checking account
(check one) _____ business checking account

Bank Routing Number _____
(always 9 digits)

Account Number _____

Name on Account _____

PAYMENT AMOUNT

For Invoice #,
Job #, or Title _____

Payment Amount \$ _____

No Convenience Fee! * \$ 0.00

Total Amount to Charge \$ _____

* Malloy is pleased to offer a free electronic payment option and will not charge a convenience fee if you pay by Malloy eCheck.

SIGNATURE

Signature _____ Date _____

Print Name _____ Phone # _____