



# Logan FIRM

IMMIGRATION & NATIONALITY LAW

## ACH (Automated Clearing House) Payment.

Client's Name: \_\_\_\_\_ Case Number: \_\_\_\_\_

### Client Bank Account Information

Account type:           Checking \_\_\_\_\_ Savings \_\_\_\_\_

Account holder's name: \_\_\_\_\_

Account number: \_\_\_\_\_

Financial Institution (Bank Name): \_\_\_\_\_

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

Amount of monthly payment: \_\_\_\_\_

Date ACH transfer is authorized: \_\_\_\_\_

Number of ACH payments authorized: \_\_\_\_\_

### **Consent and release agreement.**

I, authorize The Logan Firm PC to process (x number) of payments in the amount of (\$xx.xx) per month. I authorize my payment to be processed each 1st day of the month. I also agree to receive bills electronically.

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