

Vendor ACH Payment Enrollment Form

This form is used to enroll in Automated Clearing House (ACH) payments. The information collected on this form will be used by Knouse Foods to transmit payment, by electronic means, to your bank. Failure to provide all of the requested information may delay or prevent the receipt of payments by ACH.

Please send the completed form AND a voided check (not deposit slip) or letter from your bank to:

Email: ap@knouse.com

Mail: 800 Peach Glen-Idaville Rd. Peach Glen, PA 17375 Attn: Accounts Payable

Upon receipt of the below form, a Knouse Foods Accounts Payable employee will contact your company for verbal verification of the account information provided. ACH remittance will be delivered via email (if provided) at the time of payment.

Vendor Information:				
Company Name (per form W-9):				
Social Security #	OR EIN#	⁻		
Address:				
Contact Name:	Title:			
Email Address (For ACH payment remittance):				
Financial Institution Information:				
New Request Change Request				
Bank Name:				
Routing Number: (Must be 9 digits)				
Account Number: (May be less than 12 digits)				
Account Type: Checking Savings				
Memo: 1: 0123456781: 123456789" 0101				
Routing/Transit # (A 9-digit number always between these two marks)	Checking Account #	(This number n the upper right	Check # natches the number in corner of the check — eeded for sign-up)	
I certify that the information above is true and correct, and that I, as a representative for the above named company, hereby authorize Knouse Foods Cooperative Inc/Knouse Foods Inc (hereinafter "Knouse") to electronically deposit payments to the designated bank account. If funds to which I am not entitled are deposited to my account, I authorize Knouse to direct the financial institution to return such funds. This authority remains in full force until Knouse Accounts Payable receives written notification requesting a change or cancellation in such time and in such matter as to afford Knouse a reasonable opportunity to act on it.				
Authorized Signature: Date:				
Printed Name & Title:				
	Internal Use Only:	Vendor #:	Terms:	
		Entered:		
	Initials	Date Initials	Date 1	nitials Date