



ACH VENDOR PAYMENT AUTHORIZATION FORM

The information being collected on this form will be used by Latin Specialties LLC. to transmit payment data, by electronic means (ACH), directly to your financial institution. **Failure to provide the requested information may delay or prevent the receipt of payments to your company.** Recipients of the payments should bring this information to the attention of their financial institution when presenting this form for completion. **Recipients should also request to be notified immediately regarding any change occurring at the financial institution that may delay or prevent the receipt of scheduled payments.** Keeping this form up to date in LS records is solely the vendor's responsibility. Failure to do so may result in lost payments. LS is not responsible for any lost funds due to incorrect, outdated or missing information.

This Section to be completed by Vendor

<p><i>VENDOR INFORMATION</i></p> <p>NAME : _____</p> <p>ADDRESS : _____</p> <p>CONTACT NAME : _____</p> <p>CONTACT EMAIL & PHONE: _____</p> <p>FEDERAL I.D.#: _____</p> <p>_____</p> <p>AUTHORIZED COMPANY REPRESENTATIVE SIGNATURE</p>
<p><i>Disclaimers:</i></p> <p>To combat e-mail fraud, communications regarding payment and/or remittance terms, payment addresses, banking information and/or contact persons for billing and/or payment purposes must be verified both in writing and by a secondary method. Customers and vendors seeking to change and/or modify any such terms should <u>first</u> contact Latin Specialties LLC's accounting department via telephone to request such changes, after which a signed written confirmation by an authorized officer of the company will be required.</p>

Financial Institution (Bank) Information

<p><i>FINANCIAL INSTITUTION INFORMATION</i></p> <p>BANK NAME: _____</p> <p>BANK ADDRESS: _____</p> <p>(9) DIGIT ROUTING NUMBER: _____</p> <p>DEPOSITOR ACCOUNT NAME: _____</p> <p>DEPOSITOR ACCOUNT NUMBER: _____</p> <p>TYPE OF ACCOUNT: <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS</p> <p>_____</p> <p>SIGNATURE & TITLE OF BANK REPRESENTATIVE</p>	<p>(_____) _____</p> <p>PHONE NUMBER</p>
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