BANK CHANGE FORM

MERCHANT INFORMATION

Merchant ID:				
Merchant Legal Name:				
Merchant DBA:				
	Phone:		Email:	
Signatory Contact Name:				
	Phone:		Email:	
Signatory Contact Name:				
	Phone:		Email:	

NEW BANKING INFORMATION

Account Beneficiary Name:				
Settlement Account:	Account #:		Routing/Transit #:	
Invoice Account:*	Account #:		Routing/Transit #:	
Return Account:*	Account #:		Routing/Transit #:	

* If different from Settlement Account

Please attach a pre-printed void check or a stamped bank letter confirming the new account number and routing/transit numbers.

SIGNATORY SIGNATURE (Same signer as the merchant processing agreement)

Name of Signatory:		Date:	
Signature:			
Name of Signatory:		Date:	
Signature:			

PLEASE COMPLETE, SIGN AND EMAIL THE BANK CHANGE FORM AND ANY SUPPORTING DOCUMENTS TO BANKCHANGES@MERCHANT-SUPPORT.COM.

If further help is required, please call our Bank Changes Department directly at 1 (855) 231-1501 and they will assist with any bank change inquiries.