



## **ACH FORM**

**Date:** \_\_\_\_\_

**\*Just a reminder you can receive your funding via ACH transfer.**

**\*Please complete this form and return via fax or e-mail (800) 379-2837 or (214) 965-5057, [info@marineone.com](mailto:info@marineone.com).**

**Dealership Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Telephone (    )** \_\_\_\_\_ **Fax (    )** \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

**Key contact** \_\_\_\_\_

**Funding:**

**Ach transfer \$7.00 charge per transaction deducted from proceeds**  
*(Please attach voided check to verify routing and account number)*

**Routing number** \_\_\_\_\_

**Account number** \_\_\_\_\_

**Thank you,**  
**Ann Jegstrup**