



Auto-Withdrawal (ACH) Authorization Form

Volunteer, please choose one:

Initial form submission
(Very first time this form is submitted for the troop)

Updated form; date _____
(You **MUST** complete the entire form when reporting any changes to troop bank account **AND** submit an updated Bank Request form.)

PLEASE PRINT LEGIBLY.

Community _____ Troop # _____

Not sure of your community? Visit <http://tinyurl.com/GSZips> and search for the ZIP code of your troop meeting location.

I, _____, money manager of the bank account for the above referenced troop, hereby authorize Girl Scouts of Southwest Texas (GSSWT) to initiate credit and/or debit entries associated with product program and accounts payable as outlined in GSSWT ACH Procedures*. In addition, I authorize GSSWT and any investigation firms it may employ to randomly review this bank account for appropriate use of troop funds. **I will notify GSSWT of any changes to the troop bank account information.**

All product program deposits will now be deposited to the council-approved TROOP bank account.

Troop Bank Information

Council-approved Bank/Financial Institution (check one)

- Broadway Bank First Commercial Bank First State Bank of Uvalde
- Frost IBC The Bank & Trust Wells Fargo+

**IF your account is currently with Wells Fargo, the account may remain at Wells Fargo unless you need to change signers. If changing signers, you must open an account at one of the other banks listed above.*

Name of Account (as it appears on check or bank statement) _____

Routing Number _____ Account Number _____

Troop Bank Account Signer Information

Primary Signer on Troop Bank Account _____ Email _____

Phone (Primary) _____ - _____ - _____ (Secondary) _____ - _____ - _____

List all names authorized to sign on the troop bank account

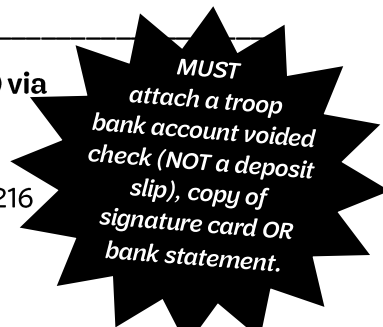
- 1. _____ 3. _____
- 2. _____ 4. _____

By signing below, I agree to the terms outlined in the GSSWT ACH Procedures and understand this authorization will remain in full force and effect until an authorized signer has submitted in writing the request to revoke authorization. I understand that not having this completed form on file with GSSWT may make my troop ineligible to participate in product programs. In addition, I agree to keep detailed records of all transactions made within this account including keeping receipts for every purchase made and all deposit slips. I understand that **NO** personal purchases nor any cash withdrawals may be made using the troop account or troop funds and that theft or misuse may result in criminal charges being filed. I agree to keep girls and families aware of troop finances and turn in detailed financial reports to the council by June 15 and December 15 of each year.*

Authorized Signature _____ Date _____

Printed Authorized Name _____

Submit this completed form (keep a copy for your records) and voided check (see note→) via email: financials@girlscouts-swtx.org fax: 210-349-2666 in-person/by mail to: GSSWT, Attn: ACH/Finance, 811 N. Coker Loop, San Antonio, TX 78216



Questions? 210-349-2404/1-800-580-7247/customer care@girlscouts-swtx.org
(*Listed in the companion for each product program and the Volunteer Essentials, August 2017)