



Auto-Withdrawal (ACH) Authorization Form

Please choose one:

- Initial form submission for new account (MUST INCLUDE VOIDED CHECK OR BANK STATEMENT)
- Revised form: signer change on account

PLEASE PRINT LEGIBLY

Community: _____ Troop: _____

I, _____, Primary Money Manager of the troop/group bank account described below, hereby authorize Girl Scouts of Southwest Texas (GSSWT) to initiate electronic debit or credit transfers, processed through an Automatic Clearing House (ACH), for any funds that may be due to the troop/group from GSSWT or any funds that may be due to GSSWT from the troop/group.

Troop/Group Bank Information

Council-approved Bank (check one):

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

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

Routing Number: _____ Account Number: _____

Troop/Group Bank Account Signer Information (PLEASE PRINT LEGIBLY)

Primary Signer: _____ Third Signer: _____

Second Signer: _____ Fourth Signer: _____

By signing below:

- I agree to abide by the policies and procedures outlined in the latest edition of the "Volunteer Essentials" handbook, available for download from the GSSWT website: www.girlscouts-swtx.org.
- I understand that 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/group ineligible to participate in product programs.
- 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/group account or troop/group funds, and that theft or misuse may result in criminal charges being filed by GSSWT.
- I agree to keep girls and families aware of troop/group finances, and turn in detailed financial reports to the council by June 15 and December 15 of each year.
- I understand that I must notify GSSWT immediately of any signer changes on this account.

Authorized Signature: _____ Date: _____

Printed Authorized Name: _____

Submit this completed form (keep a copy for your records) via:

Email: customercare@girlscouts-swtx.org

Mail or Drop-off: 811 N Coker Loop, San Antonio TX 78216

Fax: 210-349-2666

Questions? Call us at 210-349-2404/800-580-7247 or email to customercare@girlscouts-swtx.org