



This form authorizes the Early Learning Coalition of Hillsborough County to deposit payments directly into the bank account. This authorization also authorizes the reversal of any incorrect entries made in error.

Please fill in all the information below to set up a permanent ACH.

New Application

Change Existing Application

Vendor Name: _____

Payee Address: _____

City: _____ State: _____ ZIP: _____

Email Address: _____

Please attach a voided check or a letter from your banking institution to complete this application.

Signature of Authorized Signer: _____

Print Name of Authorized Signer: _____

Date: _____

