

ADAM M. GOODMAN
STANDING CHAPTER 13 TRUSTEE
Northern District of Georgia
SUITE 200, 260 PEACHTREE STREET N.W.
ATLANTA, GEORGIA 30303-1665
(678) 510-1444

AUTHORIZATION FOR ELECTRONIC DISBURSEMENTS

Payee Requesting Electronic Disbursement:

Payee Name: _____
Payee Tel. Number: _____
Payee Address: _____

Email address for voucher _____

Payee Bank Name: _____
Payee Bank Address: _____

ACH Coordinator – (Bank Contact):
Name: _____
Title: _____
Phone: _____

Account Information

Routing Transit Number: _____
Account Name: _____
Account Type (Checking/Saving): _____
Account Number: _____

*****Voided Check or Bank Letter that match the institution with the bank information.**

Adam M. Goodman, Chapter 13 Standing Trustee, hereafter called Trustee, is hereby authorized to initiate credit entries to the account indicated above. This authority is to remain in full force and effect until TRUSTEE has received written notification from me or other authorized representative of its termination in such time and manner as to afford TRUSTEE a reasonable opportunity to act on it. This authorization will terminate if TRUSTEE discontinues the electronic Payee Disbursement Program. TRUSTEE reserves the right to discontinue the Payee Disbursement Program at any time without further notice to Payee.

Authorizing Signature

(Print Name)

Title

Telephone Number

Email Address

Verified by: _____

Date: _____