

Phone: 513.871.2787 Fax: 513.871.2706

ArtsWave.org

EFT Payment Authorization Form

Here's How Electronic Funds Transfer works:

You authorize a payment to your checking account. You will be paid the amount indicated in your award letter or as your contract reads.

Please complete the information below:

I authorize ArtsWave to credit my bank account (full name)	
Billing Address	Phone#
City, State, Zip	Email
Account Type: Checking Savings Name on Acct	Routing Number Account Number

SIGNATURE _____ DATE _____