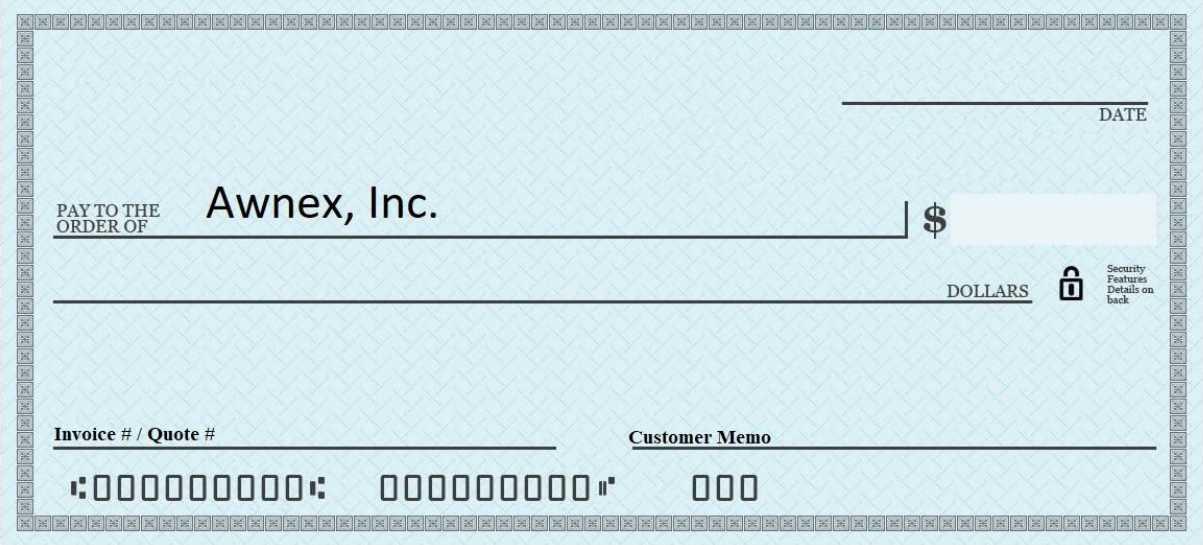
eCheck Authorization Form

I authorize Awnex, Inc. to proceed with a one-time electronic debit of my bank account on the date and in the amount listed below. I acknowledge that electronic debits against my account must comply with United States law and be made in U.S. currency.

Write or type in the check image below. You may use your check number if your accounting process requires it. You must provide either an Invoice #, Quote # or reference to what you are paying for.



Customer Information

Name on Account _____

Routing Number _____

Account Number _____

Account Address _____

Account Type Checking Savings

Is this a Business account or Consumer account? Business Consumer

This payment authorization is to remain in effect until I, _____ (Customer Name) notify Awnex, Inc. of its cancellation by giving written notice in enough time for the business and receiving financial institution to have a reasonable opportunity to act on it.

_____ _____

Authorized Customer Signature Date

_____ _____

Printed Name Customer Email

Please note: Charges will come through as Magnolia Financial. Please allow up to 48 hours for payment to show up on your bank statement.