AMUNDSON CIGAR AND CANDY

ACH Enrollment Form Information

Store Information				
Store Name:				
Store Address:	www.			
Store City:		State:		Zip Code:
Contact Name:		Phone #:		
E-Mail Address:		- CHOCANA	West version and the second se	,
Bank Information				·
Bank Name:	<u></u>			
Account Type:	Checking	Savings	·	
Account Number:	hermony and the second		•	The second state of the se
Routing Number:			the state of the s	
Account's Authorization		authorizing Amur	ndson Cigar and C	andy to begin drafting
payments for invoices		•		
Signature:	The second secon	Date:_		
Please submit the con	npleted form and a c	copy of a volded c	heck if available.	
Email <u>amundson9148@comcast.net</u> or mail to the following address:				
Amundson Cigar & Candy				

9148 Old Cedar Ave

Bloomington, MN 55425

If you have any questions, please call us at 952-854-2222. You may also fax form to 952-854-5329.