

ACH Personal Account Authorization Form

CurrencySource.com OrderWires.com OrderCurrency.com TravelCurrency.com

FX Department

To complete this form: Click on 'Highlight Fields' in the upper-right corner of your screen to fill in the form. Type in the required information, print and sign form and fax to our office.

This form must be faxed to 830.990.4657 w/ Required Attachments before your account will be activated.

Customer's Contact Information

Date: ____/____/____ Date of Birth: ____/____/____ SS# _____

Name: _____ E-Mail Address _____

Company Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone # _____

Alternate Phone #: _____

How often will you need our service? Just this once ____ Weekly ____ Monthly ____ A few times a year ____

Services needed: Bank Draft ____ Wire Transfer ____

Expected # of monthly transactions: ____ Expected monthly dollar (USD) amount of transactions: \$ ____

Reason for international Payment: _____

How did you hear about us:

1) OrderWires.com ____ CurrencySource.com ____ X-Rates.com ____ Oanda.com ____ Other (please specify) _____

2) Which keyword/phrase did you use in your search to find us?: _____

Paying by ACH (electronic funds transfer via Automated Clearing House), complete the banking information:

I (we) hereby authorize Travel Currency, hereinafter called COMPANY, to initiate debit entries to my account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository (Bank Name): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Date account was opened (month/year) ____/____

Account #: _____ Checking ____ Savings ____ Money Market not Applicable.

Routing #: _____ (routing # will always be 9-digits)

Note: Returned Debits/Credits will receive a \$35 service charge.

I authorize the bank above to confirm this information. By signing this form I verify that I am a signing authority on this bank account and I authorize TravelCurrency to credit and debit funds in this account. **Debits/Credits to your account will appear as TravelCurrency, Inc.**

REQUIRED ATTACHMENTS:

1) Copy of blank/voided check (used to verify your account and routing information)

2) Current driver's license

Print Name Here: _____

*** Print this document, sign and fax to your office.

Sign Here: _____

431 S. Lincoln St., Fredericksburg, TX 78624 * office: 830-990-1413 or 877.627.4817 * fax: 830.990.4657

Last Updated 1/8/2008