



## Login Payment Program (LPP) Enrollment

Company Name \_\_\_\_\_

Company Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Checkmark **ONE** of the following payment options:

<input type="checkbox"/>	<p><b>ACH Payment (Company will push funds to Login's account)</b></p> <p>I agree to process payment via ACH and guarantee that the funds paying the account in full will be in Login's designated bank account by the 10th of the month. If the 10th is not a US banking day, then the funds will be there on the next US business day. If funds paid in full are late, the Net30 amount will be due. For Login's banking information, please email Accounting at a@loginbusiness.com.</p>
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**-- OR --**

<input type="checkbox"/>	<p><b>ACH Collections (Login will pull funds from Company's account)</b></p> <p>I authorize Login to automatically charge the bank account listed below to clear charges to my business account. I understand that the bank account listed below will be charged on the 10th of the month. If the 10th is not a US banking day, then the funds will be charged on the next US business day.</p>										
	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;">Bank Name</td> <td></td> </tr> <tr> <td style="text-align: center;">Bank Account Number</td> <td></td> </tr> <tr> <td style="text-align: center;">Bank Routing Number</td> <td></td> </tr> <tr> <td style="text-align: center;">Account Type</td> <td><input type="checkbox"/> Checking OR <input type="checkbox"/> Savings</td> </tr> <tr> <td style="text-align: center;">Account Type</td> <td><input type="checkbox"/> Business OR <input type="checkbox"/> Personal</td> </tr> </table>	Bank Name		Bank Account Number		Bank Routing Number		Account Type	<input type="checkbox"/> Checking OR <input type="checkbox"/> Savings	Account Type	<input type="checkbox"/> Business OR <input type="checkbox"/> Personal
Bank Name											
Bank Account Number											
Bank Routing Number											
Account Type	<input type="checkbox"/> Checking OR <input type="checkbox"/> Savings										
Account Type	<input type="checkbox"/> Business OR <input type="checkbox"/> Personal										

### Authorization

Must be an authorized signer for the Company and authorized to approve payment options.

Contact Name \_\_\_\_\_

Contact Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Complete and email to Accounting at [a@loginbusiness.com](mailto:a@loginbusiness.com) or fax: 520.989.8088