



5232 N. WESTERN AVENUE
 CHICAGO, IL 60625-2448
 Telephone (773) 334-4999 / Fax (773) 334-4994

ENROLMENT FORM for REMIT-BY-PHONE SYSTEM
 (thru Automated Clearing House or ACH)

Name: _____

Address: _____ Apt. / Suite Number _____

City: _____ State: _____ Zip Code: _____

Telephone: (_____) _____ (Home) / (_____) _____ Extn.____ (Work)

(_____) _____ (Cell) / E-mail Address: _____

QUESTIONS: **OFFICE USE ONLY – Please do not fill in the next two lines.**

1. Question: _____ Answer: _____

2. Question: _____ Answer: _____

This is to authorize CIRERA EXPRESS CORPORATION to automatically debit from my checking account listed below a predetermined amount upon my instructions over the phone. I understand that CIRERA EXPRESS CORPORATION and its employees will keep my personal and bank information secure and confidential. I understand that Cirera Express will not sell nor share my personal and bank information to any third party without my knowledge. **I also understand that there is a minimal fee of five dollars (\$5.00) per bank transaction** that CIRERA EXPRESS CORPORATION will charge to process payments over the phone and I agree to pay this amount on top of the usual service fees that apply.

By signing this form, I confirm that I have read and agree with the terms and conditions covering Cirera Express Corporation's Remit-By-Phone System of electronic funds transfer by ACH and that I am authorizing CIRERA EXPRESS to debit an amount from this account upon my instructions when I avail of its services through this system. I understand that I need to send in another form for any changes in my personal or bank information. *(Note: Please allow 3 working days from receipt of this form before initial use of the REMIT-BY-PHONE system or after making any amendments to your personal or bank information.)*

SIGNATURE: _____ Password (**OFFICE USE**): _____

Driver's License or State ID Number: _____ SS Number: _____

Routing Number: _____ Checking Account Number: _____

Bank Name: _____ Branch: _____

Instructions: Please attach a void check in the box below and MAIL to our office. Call (773) 334-4999 to confirm receipt of this form by CIRERA EXPRESS and to confirm your enrolment in this system by setting up a password that you will use each time you need to send a remittance by phone. Thank you!

