

ACH Request Form

In an effort to effectively implement this system, we are requesting that you provide us with the following information (please type or print):

Name _____

Link ID (5 or 6 digits) _____

Address (including city, state, zip) _____

Bank name _____

Bank Address (including city, state, zip) _____

Name on bank account/Beneficiary _____

Transit routing number (ABA) _____

Bank account number _____

Type of account (checking or savings) _____

Account type (personal or business) _____

Please send the information requested above securely to GeoBlue via email or regular mail;

Email: partnerprogram@geo-blue.com

GeoBlue
Attn: Individual Sales Team
933 First Avenue
King of Prussia, PA 19406

If you have any questions or concerns, please email partnerprogram@geo-blue.com.

Thank you.

Sincerely,
Partner Program