



ACH - ACCOUNT DEBIT FORM

Date: _____

I authorize Fare Buzz to debit the following checking account:

Account Holder Name: _____

Checking Account: # _____

ABA Routing: # _____

Amount: \$ _____

Booking # _____

Passenger Name(s): _____

The copy of the **Void Check** is attached for your reference. I understand that this signed form is my Authorization for this transaction.

Signature: _____

Name (s) _____

(PLEASE PRINT)

Email to: accounting@farebuzz.com

137W 25th Street, 11th Floor, New York, NY 10001

Phone: 888.808.4123, 212.391.2313

www.FareBuzz.com