Artful.ly

Electronic Fund Transfer Sign Up Form

Organization Name:		
Your Name:		
	First	Last
Email Address:		
Account Holder Name:		
Account Holder Address (incl	ude City, State and Zip):	
Account Holder Phone Numb	er:	
Bank Account Number:		
Bank Routing Number*: (The routing number is also r		er. It is ALWAYS 9 digits.)
Account Type: Business (Checking Personal Che	ecking
Name of Bank:		
Branch City, State and Zip:_		
Effective Date:	(this can be the curre	ent date)
PLEASE NOTE: A return fee incorrect account and/or ro		ems returned due to a closed account or for
ACCOUNTHOLDER SIGNATUI	RE	
By signing above I am agree	ing that I am the accounthol	dor and Lauthorizo Fractured Atlas to make

By signing above, I am agreeing that I am the accountholder and I authorize Fractured Atlas to make electronic fund transfers into the named account, and, if necessary, make withdrawals from the account to cover any negative Artful.ly account balances or transactions credited in error.

Please return this completed form along with a copy of a voided check to:

Email: support@artful.ly

or

Fax: 212-277-8025, ATTN: Artful.ly

* On your check, the routing number is typically the bottom left series of numbers.

