



ACH Authorization Form

Please Select One:		
You have been paid by check and would like to have ACH payment	You have been paid by ACH but need your account to be updated.	You would like to cancel ACH payment to be paid by check.
<input type="checkbox"/> New ACH	<input type="checkbox"/> Change ACH	<input type="checkbox"/> Cancel ACH

Payee Information:	
Payee Name:	
Payee Number:	SSN / TIN (Last 4 Digits):
Address:	
Contact Name on File (if different than Owner):	
Email Address:	Phone Number:

Financial Institution Information: All requests MUST INCLUDE a Void Check or Bank Letter.	
Bank Name:	
Name on Bank Account:	
Bank Account Number:	
Nine-Digit Bank Routing/Transit Number	
Remittance Email Address (if different than above)*:	
<small>*Remittance Email Address is where notice of ACH deposit will sent.</small>	
Type of Bank Account:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings

Approvals/Authorizations:	
I hereby authorize Revenant Energy (Revenant) and or it's affiliates/subsidiaries to initiate automatic deposits to my account via electronic funds transfer (EFT also known as ACH) at the financial institution named above. Further, I agree not to hold Revenant responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account. This authorization shall remain in full force and effect unless and until I or the financial institution change or cancel such authorization. This authorization shall be deemed to have been changed or canceled only after 30 days of Crescent's receipt of a written request from me.	
Print Name: _____	Title: _____
Signature: _____	Date: _____

Where to Return:
Revenant Energy c/o PakEnergy 6608 N. Western Ave., #607 Oklahoma City, OK 73116