

Electronic Funds Transfer (EFT) Form

SBC Membership includes access to a house charge account. To pay your house account charges, please select one of the options below. Payments are automatically processed between the 7th and 12th of every month for the charges from the prior month. Non-Members must pay at point-of-sale. After the first successful payment, this form will be shredded.

Primary Account Holder Information

☐

Member

☐

Non-Member

Primary Account Holder Name: _____
(Please Print)

Email Address For Communications: _____

Mailing Address

City

State

Zip Code

Phone Number

OPTION 1: Credit or Debit Card Information

Print Name As It Appears On Card

Card Type:

_____ American Express

_____ Discover

_____ Mastercard

_____ Visa

Credit Card Number

Expiration Date

Security Code

Billing Zip Code

OPTION 2: Checking Account Information

Name On Checking Account

Name of Bank

State

Routing Number (9 digits)

Account Number

~ FOR EMPLOYEE USE ONLY ~

Entered by & date: _____ Ran Payment by & date: _____

Double Checked by & date: _____