



Payment Options Form

Name: _____

Email: _____ Date: _____

Please only complete the information for the method you prefer

Electronic Funds Transfer (EFT)

**include a letter from your bank confirming the details you provide below.*

Beneficiary Name on Account	
Account Number	
Bank Name	
ABA Routing Number (for US accounts)	
Swift Number (for non-US accounts)	
IBAN Number (if applicable)	
Currency Accepted (for non-US accounts)	
Branch location	

Check (issued in US dollars only)

Payable to	
Address Line 1	
Address Line 2	
Address Line 3	
City	
State	
Postal Code	
Country	