



Electronic Funds Transfer

Stop Writing Checks!

You'll receive your deliveries just like you do today! A signed copy of the invoice will be left with your receiving personnel. After your delivery, Watkins Distributing will transmit the payment information to JPMorgan Chase, "**WePay**", in compliance with state laws. This includes robust fraud monitoring to ensure only legitimate transactions are processed.

- Idaho customers, the funds will be transferred out of your account the following business day.
- Montana customers, the funds will be transferred out of your account 7 days later.

You can view 365 days of payment history, 24/7, via the BudPayments.com website, your own online banking, or by calling your banking customer service team.

Here's What You Need to Do:

- 1) Fill out information on "**Electronic Funds Transfer Form**" with a voided check.
- 2) Return form to the address listed below, back to your sales rep, or email a completed copy.
- 3) You will receive two emails from abi-app-support@dxc.com. One will provide login info for Budpayments.com and the second will include two links to complete the account verification process.
- 4) Once the Verification Process is complete, you are all set!

If your bank account has an ACH filter to prevent unauthorized ACH debits, please contact your bank to add the following ACH IDs to allow payments to process. This will reduce the chance of rejected payments that may delay deliveries until the EFT payment processing can be corrected.

- **4693231001**
- **5551232356**

There is NO cost to you!

Idaho Customers - Return form to:

Cyndle Cook
Watkins Distributing
5999 S Doug Andrus Dr.
Idaho Falls, ID 83402
Email: ccook@watkinsdist.com
For questions, call 208-563-5924

Montana Customers - Return form to:

Shauna Euell
Watkins Distributing
1010 Intermountain St.
Billings, MT 59101
Email: seuell@watkinsdist.com
For questions, call 986-300-6079



Electronic Funds Transfer

* Please Provide a Voided Check *

Retail Partner

Company Name _____

Company Address _____

Contact Name _____

Contact Phone _____

Contact Email _____

Retail Trading Partner Bank Information

Bank Name _____

Bank Address _____

Contact Name _____

Contact Phone _____

Contact Fax _____

Bank Account Number: _____

Bank Routing Number: _____

Authorization:

(Printed Name)

(Date)

(Signature)