

ACH ADDENDUM



If you wish to have different ACH accounts assigned to different Horizon locations/subgroups, please complete this form and include it with your Plan Design Guide.

Group Name _____ Group Number _____

Please list the group location name(s) that should be set up with the following ACH information:

_____	_____
_____	_____
_____	_____

I hereby authorize Horizon to utilize our bank account for this location(s) through Automated Clearinghouse for the following activities:

Claim Reimbursements HSA Contributions

The following bank account information is provided to Horizon for initiation of this procedure:

Bank Name _____ Type of Account: Checking Savings

Bank Location/Branch _____

Bank ABA Number _____ Bank Account Number _____

Please list the group location name(s) that should be set up with the following ACH information:

_____	_____
_____	_____
_____	_____

I hereby authorize Horizon to utilize our bank account for this location(s) through Automated Clearinghouse for the following activities:

Claim Reimbursements HSA Contributions

The following bank account information is provided to Horizon for initiation of this procedure:

Bank Name _____ Type of Account: Checking Savings

Bank Location/Branch _____

Bank ABA Number _____ Bank Account Number _____

Please list the group location name(s) that should be set up with the following ACH information:

_____	_____
_____	_____
_____	_____

I hereby authorize Horizon to utilize our bank account for this location(s) through Automated Clearinghouse for the following activities:

Claim Reimbursements HSA Contributions

The following bank account information is provided to Horizon for initiation of this procedure:

Bank Name _____ Type of Account: Checking Savings

Bank Location/Branch _____

Bank ABA Number _____ Bank Account Number _____

Questions? Call Member Services at 1-888-215-0025.

Send via secured email only:
HorizonMyWay.Documents@HelloFurther.com

Fax to:
866-231-0214

Mail to:
P.O. Box 64193
St. Paul, MN 55164-0193