



E-Check Vendor Payments

Today's Date: \_\_\_\_\_

Passenger Full Names & Birth Dates:

1. \_\_\_\_\_ DOB \_\_\_\_\_  
 2. \_\_\_\_\_ DOB \_\_\_\_\_

Address:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Trip Name: \_\_\_\_\_

Trip Length: \_\_\_\_\_ Tour or Cruise Only (circle one)

Booking #: \_\_\_\_\_

Dates of Travel;

Deposit due: \_\_\_\_\_ Amount Required: \$ \_\_\_\_\_

Final Payment due: \_\_\_\_\_ Amount to charge: \$ \_\_\_\_\_

Bank Name: \_\_\_\_\_

Routing #: \_\_\_\_\_ (1<sup>st</sup> 9 digits at the bottom left of check)

Account #: \_\_\_\_\_

Please Fax (530-676-3758) or E-mail: [gwenduncan@inreach.com](mailto:gwenduncan@inreach.com)

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