

Payment terms & method

PAYMENT TERMS

Applicant requests the following ☐ payment terms **OR** ☒ changes to its payment terms

(Check only **one** box above and below):*

- 1 ☐ **Weekly**
Payment of invoices for purchases made Saturday through Friday must be received the following Friday.
- 2 ☐ **Semi-monthly**
Payment for invoices dated the 1st through the 15th must be received by the 25th of the same month. Payment for invoices dated the 16th through the last day of each calendar month must be received by the 10th of the following calendar month.
- 3 ☐ **Monthly prepay**
Monthly anticipated purchases are due and payable on the 25th day of the preceding month.
- 4 ☒ **Other** (please specify) ZI30 - net 30 terms.

All payments must be received for deposit to AmerisourceBergen ("AB") account by the due date. AB may change available payment terms from time to time. Subject to credit approval, Applicant may request changes to payment terms upon thirty (30) days written notice prior to the beginning of a calendar month. AB may adjust price of goods for different payment terms to reflect AB's cost of funds and any resulting credit risk.

PAYMENT METHOD

Provide Bank Account Information for AutoPay and Online Methods only. Please attach to the completed application either 1) a voided blank check OR 2) a letter on bank letterhead validating the following information: company name, bank account #, and transit routing #. Please provide Bank information in the section at the bottom of this form.

Applicant requests the following ☐ payment method **OR** ☐ changes to its payment method

(If not paying by check, please select **one** of the preferred options below.)*

- ☐ **AutoPay**
AutoPay is a convenient option in which invoices will be paid automatically on their due dates using your default bank account on file. This will avoid any late fees and free you from having to remember when to pay.
- ☐ **Online**
Online payment, via ABOder, is a free, secure payment option that allows you to: select which open invoices and credits you want to pay, schedule the payment date (same day or future), and select and manage your bank information. You will receive same day credit on your scheduled payment date as long as it is processed before 8:00 p.m. ET.
- ☐ **ACH/EFT**
ACH Credit Payment is an electronic funds-transfer that you initiate from your bank account to ours and may come with a fee to you. To avoid any potential late fees, please be mindful there is a 1-2 business day settlement, depending on your bank institution. Credit will be given on the day of receipt. Remits should be sent via EDI or CTX (preferred) or emailed in advance to AR-Remit@amerisourcebergen.com.
- ☐ **Wire**
Wire transfers are initiated and processed from your bank to ours, typically in the same day and with a fee. Please be sure to include your customer number. Remits should be emailed in advance to AR-Remit@amerisourcebergen.com.

I have read and agreed to the terms specified above. By my signature below, I certify that all information provided is true and complete and intending to be legally bound hereby request the payment terms.

By my signature below, I hereby authorize AmerisourceBergen(AB) to initiate debit entries against the bank account and financial institution indicated below ("Bank") to debit the same to such account, per the above payment terms. I agree to notify and/or authorize my Bank to accept future AutoPay and Online withdrawals from AB. In order to validate my account, I hereby authorize AB to withdraw a penny debit amount before any funds may be withdrawn from my account. This authorization will continue in effect until it is revoked by my written notice to AB. Any such notification to AB shall be effective only with respect to entries initiated by AB after receipt of notification and a reasonable opportunity to act upon it. Any such notification to Bank shall be effective only with respect to entries debited to my (our) account by Bank after receipt of such notification and a reasonable time to act upon it.

Customer name*	Address, city, state, zip*		Bank name*	Bank account #*
DBA (if applicable)*	AB account #*	Phone #*	Bank address*	
Authorized signature*	Print name and title*	Date*	Bank transit routing #*	
	Tim O'Hare County Judge			

Amerisource 04102023

APPROVED AS TO FORM:

Kimberly Colliet Wesley
Criminal District Attorney's Office*

*By law, the Criminal District Attorney's Office may only approve contracts for its clients. We reviewed this document as to form from our client's legal perspective. Other parties may not rely on this approval. Instead those parties should seek contract review from independent counsel.