

Returned Item Release Form

(Complete and Submit to Bank)

Merchant's Bank Name _____

Address _____ City _____ State _____ Zip _____

Contact Name _____ Phone _____ Fax _____

TO WHOM IT MAY CONCERN:

I / we hereby authorize and instruct you to mail all return items to: **NSF Pursuit, Inc.**
1148 Pulaski Highway
Suite 308
Bear, DE 19701

This address and authorization applies only to return items and is to remain in effect until canceled in writing. Please forward these items after the first failure. **Do Not Present Items a Second Time.**

Routing Number (9 digits) _____ Account Number _____

Merchant (Account Name) _____

Contact Name _____ Title _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Date _____

IMPORTANT: Should you have any questions regarding this authorization, please don't hesitate to contact our customer service department at **302-838-9100**

As confirmation, please have your banker sign and fax this document back to us at **302-838-9120**

Received by _____ Date _____
(Bank Representative Signature)

(Print Name)

Thank you for your assistance.

NSF Pursuit
302-838-9100