

**[INSERT COMPANY NAME & LOGO]**  
**Company Address & Phone Number**

As a payment option, **[Insert Company Name]** offers payees the opportunity to receive future payments electronically, rather than by check. Your payments will be deposited into the checking account of your choice. In addition to having the money deposited electronically, you will also be notified of the deposit either by fax or e-mail. The fax or e-mail will provide you with all the information that would normally be on your check stub. To receive payments electronically, you must print, complete this form, attach a voided check **[Not necessary, but recommended]** and return both to the **[address/e-mail]** above.

Payee Information	
Payee Name:	SSN or Federal ID #:
Remit Address(es) for applicable accounts:	

Bank Information	
Bank Name:	
Name on Account:	
Account #:	
Routing #:	

**FAX or E-MAIL ADDRESS for payment notification.**

(Place a check mark in front of the method of notification that you prefer.)

<input type="checkbox"/> E-mail Address:	<input type="checkbox"/> Fax #:
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Name(s): \_\_\_\_\_  
*Please print*

Title: \_\_\_\_\_

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Date**

TAPE VOIDED CHECK HERE

**[Voided check not necessary, but recommended]**

*Once you've made any changes, provide this form to Vendors you'd like to pay electronically.  
Have them complete the form and return to you.  
**[DELETE THIS SECTION BEFORE DISTRIBUTING]***