Electronic Funds Transfer Authorization Agreement Instructions Effective 5/1/23

Section 1

- A. Enter the complete payee's name, address, phone, and email contact for remittance notification.
- B. Enter the Federal Tax Identification number of the payee.
- C. If payee was previously paid via ACH and there is a change in banking information, enter the prior banking information in the top (section 1) of the form.

Section 2

- A. Provide the name and phone number of the financial institution authorized to conduct the transaction.
- B. Enter the ABA/Routing number of the selected financial institution. This is a nine-digit number that is shown on your check. It may also be obtained by contacting your financial institution.
- C. Enter the account number to which the electronic funds transactions are to be credited.
- D. Indicate whether the account is a checking or savings account.
- E.An authorized signer or designate of the account must sign and print their name, their department or title, and the date signed.

An authorized signer on the bank account must sign this authorization form. Please forward the signed authorization form to:

Purdue University Attn Accounts Payable 2550 Northwestern Ave. Ste. 1100 West Lafayette, IN 47906-1332

OR

If you do not have a File locker account to send the information securely, we can send you an Upload Request for you to utilize upon request.

DO NOT SEND BANK ACCOUNT INFORMATION VIA EMAIL. EMAIL IS NOT SECURE.

If you have any questions, please contact ap@purdue.edu.



Section 1

Print Payee Name (as it appears on the bank account	t)	Phone Number
Address	City	State Zip
Contact Name	Email Address -	required for payment notification.
Federal Tax ID#		EIN SSN
Change in banking information: (If previously be banking information currently on file at Purdue Acc		and there is a change in banking, provide the
Prior Financial Institution Prior	r Routing Number	Prior Account Number
	Section 2	
New banking information:		
New (Bank) Financial Institution		New Bank Phone Number
New Bank ABA/Routing Number		Checking Savings
New Bank Account Number		
You (Payee) must notify Purdue University immediately if payments to an account <u>outside</u> of the <u>United States</u> . We we bank can satisfy its regulatory obligations. Purdue cannot be	vill then need to colle	ct additional information from you so that our
I certify that the information provided is correct and for direct deposit transactions and am entitled to pro initiate credit entries, and debit entries in the event of This authorization will remain in effect until revoked Team.	vide this authoriza of overpayment, to	ation. I hereby authorize Purdue University to the account and financial institution listed above.
Signature of Authorized Signer on Bank Acct.	Title	·
Printed Name		e (Month-Day-Year)