

Electronic Funds Transfer (Direct Deposit) Authorization

Purpose of Form: To receive funds owed to you by Western through a direct deposit to your financial institution.

Instructions: Complete pages 1 and 2 and submit to one of the addresses listed at the bottom of the form.

Individual/Vendor Information

Vendor Person

First or Vendor Name: _____

Last Name: _____

W# or last 4 digits of EIN/SSN: _____

Phone #: _____

Financial Institution Information

Name of Financial Institution: _____

Checking Account Savings Account

Voided Check (for checking account) or Deposit Slip (for savings account) is attached.

If voided check not attached, complete the information below:

Bank Routing Number: _____

Bank Account Number: _____

Please confirm with your banking institution that the numbers you are providing are accurate for the direct deposit process.

Terms and Authorization

In accordance with RCW43.41.180, I hereby authorize and request Western Washington University, until this authorization is revoked, to transfer the full amount of amount due on any invoices/reimbursements submitted to the designated financial institution for deposit in my account.

If any action taken by me, without adequate notification to Accounts Payable, results in non-acceptance of the transfer by the designated financial institution, I understand that Western Washington University assumes no responsibility for processing supplemental payments until the funds are returned to Western Washington University by the financial institution.

If the electronic transmission for this authorization for any reason results in an overpayment of the amount actually due and payable to me, I hereby authorize WWU to either withhold a sum equal to the overpayment from my next payment or seek full reimbursement by whatever means is appropriate.

Signature: _____

Date: _____

Deposit Notifications and Changes

Your direct deposit will begin on the next available check run after the form has been processed by Accounts Payable Department.

Confirmation of the Direct Deposit will be sent to you via email.

Please provide an email address: _____

If you are changing your account number or financial institution, submit a new direct deposit request form.

To stop your direct deposit immediately, please call 360-650-6815. Otherwise, go to the Accounts Payable website at <http://www.wvu.edu/fs/ap/index.shtml>, click on "Forms," then complete and submit the "Cancel Direct Deposit" form.

Questions? Call 360.650.6815

Send this completed and signed form to:

University Mail System:

MS-1420

US Postal Mail:

WWU

Accounts Payable

PO Box 218

Bellingham, WA 98227-0218

To protect your information, please send this form via one of the mailing addresses above, do not submit through email.

