

## ELECTRONIC FUNDS TRANSFER ACH REQUEST FORM

New Request ☐ Revision ☐												
Section I – VENDOR INFORMATION												
Business Name												
Contact Person												
Phone Number	(	)		Emai								
Section II – BANK INFORMATION Checking Account  or Savings Account												
Bank Name												
ABA Routing Number for ACH Transmissions <sup>1</sup>												
Bank Account Number												
Old Bank and Account No. (Revision Requests Only)												
Bank Address												
City	y			State	State			Zip Code				
Bank Contact Person												
Email Address												
Phone Number			)				Fax Numb	oer	(	)		
Section III - VENDOR AUTHORIZATION FOR ACH TRANSMISSION												
Name of Requestor &	Title											
Signature					1	Date						
Section IV - TJPA AUTHORIZATION FOR ACH TRANSMISSION												
Finance Authorization												
Date					TJP	A Vend	dor Numbe	r				

<sup>&</sup>lt;sup>1</sup> Please confirm the proper routing number for ACH transfers with your bank to avoid delays in or rejection of payments.