

## **A/P - Travel – Direct Deposit Authorization**

S:/FORMS/APDIRECT DEPOSIT FOR VENDORS

Jefferson Lab electronic payment transactions follow the ACH payment method guidelines using CTX formatting. This format allows addenda records; invoice number, date and dollar amounts, to be referenced on your bank advice.

I hereby authorize JSA/TJNAF to initiate credit entries to my account and the depository named below.

Bank Name \_\_\_\_\_

Bank Transit ABA Number \_\_\_\_\_

(First 9 digits in lower left hand corner of deposit slip or check)

Account Number \_\_\_\_\_

Account Type                      Checking \_\_\_\_\_      Savings \_\_\_\_\_

This authority is to remain in full force and effect until JSA/TJNAF has received written notification from me of its termination in such time and in such manner as to afford JSA/TJNAF a reasonable opportunity to act on it.

Company Name \_\_\_\_\_

Authorizing Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

Email Address \_\_\_\_\_

**PLEASE ATTACH VOIDED CHECK OR DEPOSIT SLIP FOR DEPOSIT ACCOUNT.**

For JLab Finance Use Only

Vendor ID \_\_\_\_\_

Payment Type \_\_\_\_\_

Entered into Vendor Master By: \_\_\_\_\_

Signature

Date