COMPLETING THE ENROLLMENT FORM:

You are to complete the unshaded portions of the enrollment form. Please complete the fields of the form with the following information:

Vendor Name - The name of your company or organization as it appears on the bank account referenced.

Vendor FEIN/SSN - The Federal Tax Identification Number or Social Security Number of your organization.

Vendor Address - The mailing address of your organization to which all payments are sent.

Telephone Number - The telephone number of the Company to contact for assistance with processing of payments.

City/State/Zip - The City/State/Zip for the mailing address listed.

E-Mail Address - E-mail address of your Company. This address will be used in the future to send vendor remittances advices.

ABA Number/Check Digit - The 9 digit routing code of the financial institution for the specified savings or checking account to which funds will be deposited. If funds are deposited into your checking account, the routing number usually precedes your checking account number on the bottom of your checks.

Check/Savings Indicator - Check the appropriate letter. "C" denotes the account information provided is for a checking account and "S" denotes a savings account.

Bank Account Number - The bank account to which funds are to be deposited.

Bank Account Description - A general description of the bank account. For example, "Company XYX corporate checking account."

Bank Name - The name of the financial institution to which funds will be deposited.

Bank Address - The mailing address of the financial institution to which funds will be deposited.

City/State/Zip - The City/State/Zip for the mailing address listed.

Bank Telephone Number - The telephone number of the branch or bank office to contact for assistance with transmission problem resolution.

Preparer's Signature - The signature of the individual completing this form.

Print Name - Print or type the name of the individual completing this form.

Title - The title of the individual completing this form.

Date - The date that the form is completed.

Phone Number - The telephone number of the individual completing the form.

NOTE: Please include a COPY of a voided check as verification of account information. You have received this newsletter solely because you are on the County’s vendor file. Receipt of this newsletter does not signify that an obligation to YOU did or does exist.