

**SUPPLIER ELECTRONIC PAYMENT INFORMATION
(For United States Banks Only)**

COMPANY/SUPPLIER INFORMATION						
Company/Supplier Name (as appears on bank account)						
Address	Street					
	City		State		Zip Code	
	Contact Name(s)					
	Telephone #					
	E-mail(s)					
Accounts Receivable Contact (if applicable)	Telephone #					
	Name(s)			Fax #		
	A/R Contact E-mail					
E-mail address(es) for notification when payments are made	E-mails addresses (separated by comma)					
US ACH BANK INFORMATION (Your local branch contact)						
Bank Name						
Address	Street					
	City		State		Zip Code	
Bank Contact (if available)	Name(s)					
	Telephone #			Fax #		
ACH Routing #	Note: This may be different than a fed wire routing number.					
Bank Account #						
Account Type	Checking <input type="checkbox"/>					
	Savings <input type="checkbox"/>					

I hereby authorize initiation of direct deposits of accounts payable disbursements from Vanderbilt University into the account specified above and agree to promptly return any funds that are submitted in error.

Signature: _____

Print Name: _____ Title: _____

Date: _____

Please note that a CTX 820 remittance file is forwarded to the receiving bank for each ACH payment. An **optional email remittance report is available upon request** for those who do not retrieve the CTX 820 remittance detail file from their bank.

Please return this form, and address questions or concerns, to SupplierRecords@vanderbilt.edu.