

AUTOMATED CLEARING HOUSE DEPOSIT AUTHORIZATION FORM

I hereby authorize Moore College of Art and Design to initiate credit entries and initiate, if necessary, debit entries and adjustments for any credit entries **made in error** to my bank account. I further authorize the Financial Institution named below, to credit and/or debit the same to such account. **Please return to the Business Office.**

Company / Student Information

Payee Name: _____
Or
Vendor Name: _____
Vendor ID#: _____
Social Security # _____
Address: _____

Vendor Contact: _____
Telephone Number: _____
E-Mail Address _____

FINANCIAL INSTITUTION INFORMATION

Bank
Institution Name: _____
Address: _____

Telephone Number: _____

Please indicate type of account: Checking Savings

Account Number: _____
Transit Routing Number: _____
Name on the Account: _____

Signature: _____ Date: _____
Title: _____