



ACH VENDOR/MISCELLANEOUS PAYMENT ENROLLMENT FORM

This form is used for Automated Clearing House (ACH) payments to provide payment related information to your financial institution. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion. You must check with your financial institution to confirm that funds will be deposited.

By signing below: I (we) hereby authorize City of Murphy to initiate vendor invoice payments directly to my (our) account. I (we) acknowledge that the ACH transactions to my (our) must comply with the provision of U.S. law. I understand that providing incorrect information can cause a delay in payment processing. Including a voided check (not a deposit slip) is recommended to reduce information errors. This authorization will retain in full force and effect until I have presented the City of Murphy with written notification for cancellation.

CITY OF MURPHY INFORMATION	
NAME: City of Murphy	
AGENCY IDENTIFIER: 75-1410102	ACH FORMAT <input type="checkbox"/> CCD
ADDRESS: 206 North Murphy Road Murphy, TX 75094	
CONTACT PERSON NAME: Trish Forrest	MURPHY TELEPHONE NUMBER (972)468-4016
ADDITIONAL INFORMATION Email completed form to finance@murphytx.org	

FINANCIAL INSTITUTION INFORMATION/PAYEE INFORMATION	
BANK NAME:	
NINE-DIGIT ABA ROUTING TRANSIT NUMBER:	TELEPHONE NUMBER (BANK):
ACCOUNT NAME:	
ACCOUNT NUMBER:	EMAIL(FOR REMITTANCE ADVICE):
ACCOUNT TYPE (Two types needed. 1. Checking or Savings and 2. Commercial or Personal must be selected): <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> PERSONAL	TELEPHONE NUMBER (PAYEE)
SIGNATURE :	TITLE :
	DATE :

ACH Form Instructions

Note: All information on the ACH Form is required. Any submission missing information will be returned to the sender for completion.

1. All Vendor payments are in the CCD ACH format for direct deposit.

Payee/Company Information

1. Name
 - A. This must be the legal name for the vendor as on file with IRS.
 - B. If invoice billing or remit to name is different from the legal name, also provide this name as a doing business as (DBA) name.
2. SSN No. or Taxpayer Id No.
 - A. This must be the legal social security number (SSN), federal employer id number (EIN), or federal taxpayer id number (TIN).
3. Address
 - A. This is the correspondence mailing address to include city, state, and zip code. Please do not abbreviate city names.
4. Contact Person Name/Email Address
 - A. This is the name of the vendor's contact person and email address.
5. Telephone Number
 - A. This is the phone number of the vendor's contact person. Please be sure to include area code. This person may be contacted to answer questions related to the vendor's file setup and/or ACH rejection.

Financial Institution Information – ACH Direct Deposit is used to make payments.

1. Name
 - A. This is the name of the bank being used for direct deposit.
2. ACH Coordinator Name
 - A. Banks have ACH Coordinators who can answer questions for vendors regarding the process. It is for your information only.
3. Telephone Number
 - A. This is the phone number of the bank or ACH Coordinator. This can be useful information if payments reject.
4. Nine-Digit Routing Transit Number
 - A. This number identifies the bank when direct deposits are made.
 - B. This number should begin with 0, 1, 2, or 3.
 - C. Take this number from a *check*, not a deposit slip.
 - (1) Deposit slip routing numbers are internal numbers for bank use only.
 - (2) If you cannot locate your routing number, contact your bank and ask for the routing number for direct deposit.
5. Account Name
 - A. This is the name on the account.
6. Account Number
 - A. This is the account number.
7. Lockbox Number:
 - A. Lockboxes are treated as checking accounts. The lockbox account number must be provided.
8. Email (for Remittance Advice)
 - A. This email will receive an automated message when payment has been processed.
9. Type of Account
 - A. Please select the type of account used (checking, savings) Also select either Commercial or Personal. Both selections **must** be included.
10. Signature and Title of Authorized Official
 - A. Signature is required. The signature must be the owner of the account in cases of individuals or a company official (with title) in cases of companies.
11. Telephone Number (Payee)
 - A. This is the phone number of the individual or company official who signed the form.