



ACCOUNTING SERVICES

SANTA CRUZ, CALIFORNIA 95064

ELECTRONIC FUNDS TRANSFER AUTHORIZATION

The University of California, Santa Cruz campus, requests your participation in a program to process your vendor payments by transferring funds electronically through the bank industry's ACH system. All remittance information for these payments will be emailed to you, and will not be sent through the US mail service. By completing this form, you agree to:

- 1) authorize U.C. Santa Cruz to make payments electronically (EFT)
2) certify the depository institution, their routing number, and your account number
3) direct that all such electronic funds transfers be made to the designated account
4) provide thirty (30) days advance notice in writing to the U.C. Santa Cruz Accounting Office of any changes in the depository institution or other payment instructions
5) receive all remittance notification by email
6) provide immediate notice to U.C. Santa Cruz of change in the email address

Your Name: _____ Your Vendor # _____
(Office use only)

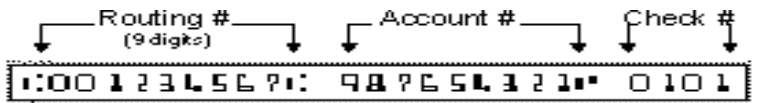
Your Address: _____

Your Email Address: _____ Your Phone # _____

Name of Bank Depository Institution: _____

Address: _____

Bank Routing Number: _____



Account Number: _____
(or staple a void check - NOT a deposit slip to this form)

Account Type: (circle one) Checking Savings

I acknowledge and agree with the terms and conditions of U.C. Santa Cruz concerning the method and timing of payment for goods and services.

(Print name of company or person)

(Signature)

(Date)

(Title)

Submit completed form: U.C. Santa Cruz - Mail Stop: Accounting Office (FAR) or FAX: (831) 459-3747
1156 High Street
Santa Cruz, CA 95064

UCSC Accounting Authorized Signature, Title, and Date: _____