

**Muscogee County School District (MCSD)**

**Vendor Authorization Agreement For Electronic Fund Transfers Direct Deposit**

Please supply the information requested and return the completed form to:

Muscogee County School District, Purchasing Department, P.O. Box 2427, Columbus, GA 31902  
706-748-2350, vendor@muscogee.k12.ga.us, Fax 706-748-2359

**Vendor Payment Information**

**Remit To:**

Vendor Name

Attention:

Tax ID Number (TIN)

Address

City & State

Zip Code

Phone

Fax

Email Address For Accounts Receivable

Do you accept purchasing cards (VISA) for invoice payment? \_\_\_\_\_

Do you accept payments through electronic fund transfers? \_\_\_\_\_

**AUTHORIZATION AGREEMENT FOR ELECTRONIC FUND TRANSFERS DIRECT DEPOSIT**

**Along with this authorization, a copy of a voided pre-printed check slip must be submitted.**

I hereby authorize Muscogee County School District to initiate credit entries and, if necessary, debit entries to correct errors to the account at the depository financial institution named below. This authority is to remain in full force and effect until MCSD receives written notification of termination in such a manner to afford MCSD and the financial institution a reasonable opportunity to act upon the notification for termination. I understand that a paper payment check may be issued in the event circumstances prevent the EFT payment.

Bank Name \_\_\_\_\_

Bank Address \_\_\_\_\_

Bank Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_

Routing Number \_\_\_\_\_

Checking Account Number \_\_\_\_\_

Authorizer Name \_\_\_\_\_ Authorizer Title \_\_\_\_\_

Signature of Authorizer \_\_\_\_\_ Date \_\_\_\_\_

**MCSD USE ONLY**

Date Authorization Form Received \_\_\_\_\_

Date Entered Into Vendor Database \_\_\_\_\_

Form Updated 05/02/2016