



University of Wisconsin Parkside ACH Payment Program

Direct Deposit of Vendor Payments

- *IT'S FREE!*
- *IT'S FAST!*
- *IT'S SECURE!*
- *IT'S EASY!*

Return completed form via

Fax: 595-2990

Email: AP.Office@uwp.edu

University of Wisconsin Parkside

Phone: 262-595-2667

Fax: 262-595-2990

email: AP.Office@uwp.edu

What are ACH Payments?

The Vendor ACH Payment Program allows payments to be deposited directly into a designated financial institution account.

Benefits of ACH Payments:

It's Free! The program is totally free as part of the UW System efforts to streamline our business relationship. It will cost you nothing to join and save you the hassle of depositing checks.

It's Fast! No more waiting for checks in the mail - the funds are deposited directly and electronically into your bank account.

It's Secure! Your money will be safe in your account and your account information is safe in a secure environment. No risk of checks ending up in the wrong hands!

It's Easy! Just complete this form! Submit via fax at 262-595-2990 or scan and email to: AP.Office@uwp.edu

Agreement: ACH Authorization for CTX Transactions

This **Agreement** governs ACH transactions initiated by the University of Wisconsin System to credit the **Company** indicated below. Both parties agree to be bound by NACHA Operating Rules as they pertain to all ACH transactions initiated by the University of Wisconsin Institutions that credit the **Company** bank account(s) listed below, an acknowledge that the origination of ACH transactions to the listed account(s) must comply with provisions of U.S. law.

This **Agreement** provides authorization for individual or recurring CTX transactions to be initiated by the University of Wisconsin Institutions when individually authorized using the methods designated below. This **Agreement** will remain in effect until **Company** cancels it in writing. Both parties agree that this **Agreement** in conjunction with any of the designated methods constitutes authorization to credit **Company's** business bank account(s), and **Company** agrees not to dispute any credits with its bank provided the transactions(s) correspond to the terms indicated in this **Agreement**.

Please Complete Information Below:

Company Name _____

Billing Address _____

City, State Zip _____

Phone # _____

Email _____

Prompt Payment Discount Terms _____%

use only if discount available for ALL UW Institutions

Bank Account

Company Name on Acct: _____

Bank Name: _____

Branch Name: _____

Account Number: _____

Bank Routing #: _____

Bank City/State: _____

The above Business Bank Account(s) are Enabled for ACH Transactions: YES or NO

I authorize the University of Wisconsin Parkside to initiate ACH Credits to the bank account indicated above, provided each transaction is initiated according to the terms of the Agreement.

Signature _____

Name _____

Title _____

Date _____

I certify that I am an authorized representative of the Company indicated above and that this authorization will remain in effect until it is canceled in writing, and agree to notify University of Wisconsin Parkside in writing at least 15 days in advance of any changes in my account information or termination of this authorization. Company understands that because these are electronic transactions, these funds may be withdrawn from its account as soon as the date an individual transaction is authorized, and that it will have limited time to report and dispute errors. Company has certified that the above business bank accounts are enabled for ACH transactions, and agrees to reimburse University of Wisconsin System for all penalties and fees incurred as a result of Company's Bank(s) rejecting ACH debits or credits as a result of the account(s) not being properly configured for ACH transactions. Company acknowledges that the origination of ACH transactions to its account(s) must comply with the provisions of U.S. law.

Please submit completed form to:

Fax: 262-595-2990

Scan and E-mail: AP.Office@uwp.edu