

## EAST STROUDSBURG UNIVERSITY **ACCOUNTS PAYABLE** EAST STROUDSBURG, PA 18301 570-422-3821

We are pleased to offer you an option for receiving reimbursement payments for travel and miscellaneous expenditures. You can have your reimbursement checks automatically deposited in your checking or savings account by submitting the Authorization for Direct Deposit form (below & S:\Accounts Payable Forms\Direct Deposit).

Direct Deposit (ACH) will help you save time in several ways:

- No need to wait for check to arrive in mail •
- No need to pick up urgent payments from Account Payable •
- No trips to bank to make deposit •
- No need to wait for check to clear
- Easy to sign up for, easy to cancel. Simply complete the Termination of Authorization for Direct Deposit form (S:\Accounts Payable Forms\ACH Form Changes).

## Here's how Direct Deposit works:

Upon receipt of this authorization form and a VOIDED check from your account, the new process will be placed into effect. All subsequent payments for ALL reimbursements will be processed via ACH until such time as you or East Stroudsburg University would terminate the agreement. This would have to be done in writing with thirty (30) days advance notice from either party. If you have any guestions regarding the completion of the electronic funds Direct Deposit ACH Authorization Form, please do not hesitate to contact Marc Shaffer at (570) 422-3821. Return your completed form with a voided check to:

> Marc Shaffer Business Office – Rosenkrans West, Room 222 East Stroudsburg University 200 Prospect St East Stroudsburg PA 18301

## NOTE: Be sure to sign the form!

## AUTHORIZATION FOR DIRECT DEPOSIT

I authorize East Stroudsburg University to initiate electronic deposits to my: □ Checking account or □ Savings account for employee reimbursements.

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S law. This authority will remain in effect until I have cancelled it in writing.

e	Email address
Staple Voided Check Here	Date
	Financial Institution Name (Please Print)
	Account Number at Financial Institution
	Financial Institution Routing/Transit Number
	Financial Institution City and State
	Signature
St	PI FASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS