



VENDOR AUTOMATIC DEPOSIT AUTHORIZATION FOR GRINNELL COLLEGE ACCOUNTS PAYABLE

Please check one:

☐

Enrollment

OR

☐

Change

Please complete:

Company Name

Tax ID#

Address Line 1

Address Line 2

City

State

Zip Code

Contact Name

E-mail Address for
Remittance Advice

Phone Number

Bank Name

☐

Checking

OR

☐

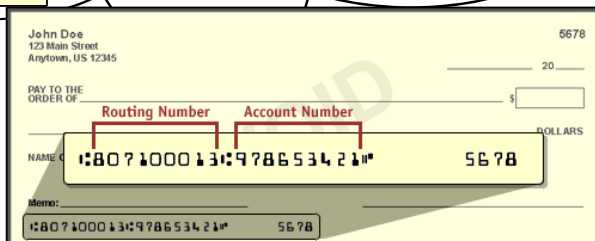
Savings

(select one)

Bank Routing Number

(9 digits)

Bank Account Number



*****PLEASE NOTE: IT IS VERY IMPORTANT TO USE BANKING INFORMATION FROM AN ACTUAL CHECK
DO NOT PROVIDE INFORMATION FROM A DEPOSIT TICKET*****

I hereby authorize Grinnell College to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to the account identified above.

Authorized Signature

Printed Name

Title

Date

Please complete this form, save and upload to the link "TAX DOCUMENTS AND BANK INFORMATION UPLOAD FORM" on the Grinnell College Accounts Payable Website. Contact Acctspay@Grinnell.edu with questions.

Internal Use Only