

CARLETON COLLEGE
Vendor Electronic Payment Authorization

To begin receiving payments electronically complete and upload the form using our secure portal. Please allow 7-10 days for processing.
 Email accountspayable@carleton.edu or call 507-222-4844 for assistance.

Section I: Vendor Information

Vendor Name _____

Address Line 1: _____

Address Line 2: _____

City, State, Zip, Country _____

City _____ State _____ Zip _____ Country _____

Contact Name: _____ Phone Number _____

Remittance Email: _____

Type of Authorization (check one): Add Change

Section II: Bank Account Details: Complete one of the following sections below

<p>Section (A): U.S. Bank Automated Clearing House (ACH)</p>	<p>Section (A) Account Details for US Bank Account:</p> <p>Bank Name: _____ Bank Routing # (9 digits): _____</p> <p>Account Type: <input type="checkbox"/> Checking OR <input type="checkbox"/> Savings Bank Account #: _____</p> <p>Please attach a verification document that confirms the details you've provided: <input type="checkbox"/> Voided check OR <input type="checkbox"/> Memo on bank letterhead including your name, organization's name, and account details</p>
<p>Section (B): Foreign Bank (Non - U.S.) Wire</p>	<p>Section (B) Account Details for Foreign Bank Account:</p> <p>Bank Name: _____ IBAN/Bank Account #: _____</p> <p>Bank Address: _____ SWIFT or BIC Code: _____</p> <p>Bank Country: _____ Name on Bank Account: _____</p> <p>Please attach a verification document that confirms the details you've provided: <input type="checkbox"/> Memo on bank letterhead including your name, organization's name, and account details</p>

Section III: Authorization

I certify that the information on this form is complete and correct. I authorize Carleton College to electronically deposit invoice payments to the undersigned bank account via the Automated Clearing House (ACH) or via the Clearing House Interbank Payment System (CHIPS) in accordance with applicable electronic payment rules. **This authorization will remain in effect until it has been canceled in writing.** In the event that funds are erroneously deposited to the undersigned's bank account, Carleton College is authorized to debit the account in the amount of the erroneous deposit with prior written or verbal notice to the undersigned.

 Authorized Signature Title

 Printed Name of Above Signature Date

Use the secure link provided to upload the completed form and voided check/bank letterhead to our online portal only. Please do not email the documents.