

ATTACHMENT 4

Electronic Funds Transfer Authorization (via Automated Clearing House) Revised 2/8/2018

SECTION 1. Enrollment Type			
Please select the box that indicates the enrolln	ient action.		
New Change	Certifi	ication	Cancel
If this is a change or a request to add to an existing vendor, please indicate the vendor number:			
SECTION 2. Remittance E-Mail Notification			
Please provide one or more Accounts Receivable e-mail addresses where ACH remittance information should be sent:			
E-mail 1:			
E-mail 2:			
SECTION 3. Account Information			
Name of Individual/Business:			
Name of Financial Institution:			
Branch Number or Name:		Branch	Phone:
Financial Institution Address (Number and Str	eet):		
City:	State:	Zip Cod	2:
Type of Account: Checking	Savings	-	
Nine-Digit Routing Number:	Depositor Account Number:		
Re-enter Routing Number:	Re-enter Account Number:		
SECTION 4. Authorization			
Authorize direct deposit of payments due the entity named in Section 3 Cancel direct deposit for the entity named in Section 3 2. Provide certification information: I certify that the entire amounts authorized to be received by this account <u>are not</u> subject to be transferred to a foreign bank account. <u>I acknowledge that if this box is not selected, the Judicial Council of California (JCC) will issue all payments by check only.</u> If I transfer money from this account to an offshore bank, I will cancel this authorization and notify the JCC. This authorization remains in full force and effect until the JCC receives written notification from the entity of its termination in such manner as to afford the JCC and financial institution a reasonable opportunity to act on it, or until the JCC terminates the agreement. This authorization and any future notifications must be sent to one of the contacts listed in Section 5:			
Authorized Signature of Entity Named in So			
×		D	ate:
Signature Provide the last 4-digits the taxpayer identification number associated with this vendor: Phone:			
Provide an e-mail address below where we can contact you to verify your request:			
SECTION 5. General Instructions			
 To enroll for direct deposit of paymedirect deposit, complete sections 1, 2 in section 4, as we will contact you t To obtain routing number or account Your direct deposit will continue to notified that you wish to re-designate new form with the new information. <i>designated account and/or financia</i> Submit this form to your court representation. 	2, 3 and 4 of this form (all inform to verify your request. t number information, contact you be deposited into your designated e your account and/or your finan Do not close your old account of <i>l institution.</i>	nation must be legible). P our financial institution. d account at your financia cial institution. To re-des <i>until your first payment i</i> .	lease include an e-mail address al institution until the JCC is ignate, complete and submit a s deposited into your newly