## VENDOR DIRECT DEPOSIT AUTHORIZATION

Upon completing this form, submit the signed original and voided check or bank authorization to Southern Utah University, Accounting Services, 351 W. University Blvd., Cedar City UT 84720 or send the completed form using this link: https://my.suu.edu/secure/upload/accountspayable

| TRANSACTION TYP   | E (Check all a   | ppropriat               | e boxes.)               |         |              |                |        |  |
|---|------------------|-------------------------|-------------------------|---------|--------------|----------------|--------|--|
| ☐ New setup   |                  |                         | ☐ Change account type   |         |              |                |        |  |
| ☐ Cancellation  |                  |                         | ☐ Change routing number |         |              |                |        |  |
|   |                  | ☐ Change account number |                         |         |              |                |        |  |
| PAYEE IDENTIFICAT   | ION              |                         |                         |         |              |                |        |  |
| Social Security number or 9 Đ Ì Đ + - ' ( Y Đ + 8. A Ì Đ 4 <u>ð e</u> A         | E - 4 ð' 9 ' A ( |                         | OR                      | SUU T N | lumber_T     |                |        |  |
| Name  | Pho              |                         | ' ( Email Addr          |         | mail Address | ress           |        |  |
| Mailing Address   |                  | !                       | City                    |         | State        | State ZIP Code |        |  |
| FINANCIAL INSTITUTION  Financial Institution Name                               |                  |                         | City                    |         |              |                | State  |  |
| Financial Institution Name  ACH Routing Transit Number  Customer Account Number |                  |                         | Туре                    |         |              |                |        |  |
|   |                  |                         |                         |         |              |                | _ cago |  |
| CANCELLATION  |                  |                         |                         |         |              |                |        |  |
| Reason  |                  |                         |                         |         |              |                | Date   |  |
|   |                  |                         |                         |         |              |                |        |  |
| AUTHORIZATION FO  | OR SETUP, C      | HANGES                  | OR CANC                 | ELLA    | ATION        |                |        |  |

NOTE:

Authorized Signature

A -74ì + ðaÐ w 74ìÐ+ €4-ì € ðRÐ+.ð4Y 'w€€( 4 ÌÐ( .ð4 (-Y Ð 4. 4 Y e - Æð- ð .4ð474ð Ð ÐÆ4+ ðÆ- Y A á7+4ìÐ+ 7 ÌÐ+.4- Ì 4 A - . -æ+ÐÐ 4 Æ ( Y Sð4ì 4ìÐ U-4ð - 74 -4ÐÌ Ð-+ð æ > 7.Ð .. Æð-4ð 8. +7 Ð. - Ì w€€ q ðÆðÐ. - Ì q+ ÆÐÌ7+Ð. å + Ð ÐÆ4+

Printed Name

- 2) It is your responsibility to notify SUU in writing of any changes to your bank account. Your direct deposit will remain active until you inactivate it with SUU or an ACH payment is returned to SUU.
- 3) If funds are direct deposited to your account in error, SUU may initiate a reversal against the account to recover/remove the funds. If such a case arises, you will be contacted prior to the reversal.
- 4) SUU is not responsible for any bank or overdraft fees charged to your account.
- ä('-ð 4ðeÆ-4ð Sð ÅÐ(+ RðÌĐÌ(+ð+4 4ìĐ(-YÐ4(.4ðæ4 Y7+-Æå( å+.+ĐÆĐðRĐÌSð ÅÐ-74ìÐ4ðÆ-4ĐÌRð-Ð-ð+(ìÐ7.ðæÆ7++Ðbefore enrollment.



Date