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 TYPE (Check all appr	ropriate bo	oxes.)				
☐ New setup			☐ Change account type				
☐ Cancellation			☐ Change routing number				
	☐ Change account number						
PAYEE IDENTIFICATIO	N						
Social Security number or Federal Employer's Identification (FEI)				DR SUUTNU	ımber <u>T</u> _		
Name		Phone Number ()			Email Address		
Mailing Address	ı	City		State		ZIP Code	
ACH Routing Transit Number	Customer Accoun	Customer Account Number Type of					unt □ Savings
CANCELLATION							
Reason							Date
AUTHORIZATION FOR	SETUP, CHAN	GES OR C	ANCELL	ATION			
I authorize Southern Utah University (SUU) to d I also agree to comply with the National Autom							made to my account in error.
Authorized Signature			Printed Name				Date

NOTE:

- 1) After enrolling in Direct Deposit, all funds will be deposited directly to your bank account unless this agreement is terminated or amended by written notification.
- 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.
- 5) Email notification will be provided prior to the payment posting to your account.
- 6) All forms received will be authenticated via email or phone using current contact information on file before enrollment.

