

TO: All Vendors

SUBJECT: Automated Payments through ACH

The City of Auburn Hills is pleased to announce the implementation of automated invoice payments for all vendors. This process will mean that as a vendor, you can choose the option of receiving your invoice payments through ACH (Automated Clearing House). Using ACH, our payment to you will be deposited directly into a checking account specified by you on the attached form. We trust that you will find this process beneficial, as payments will be received sooner than with our current check process.

Please find, on the backside of this letter, a form requesting information needed to facilitate this process. Once we receive the completed form, our system will be updated with the information provided. As each payment is processed, we will send an email notifying you that a deposit has been made to the account you specified. It is imperative that the email notification is sent to the person who will use the information provided to credit our account with your company. Automatic payments will be processed not less than bi-weekly, same as the check payments are now.

Please take a moment to fill out the attached form and return it. We need ALL information on the form to be completed. *We hope that you choose to take advantage of this convenient and fast form of invoice payment.* Once your information is received and processed in our system, automatic payments to you will begin. Please allow up to 30 days maximum for ACH to begin. Please remember, this is not for Wire Transfers, but for ACH.

Please return the completed form, along with a current and completed W-9 form, to Reeta Odish at ahpayables@auburnhills.org

Should you have any questions, please do not hesitate to call (248) 370-9420

City of Auburn Hills
1827 N Squirrel Rd, Auburn Hills, MI 48326
Phone (248) 364-6817 Fax (248) 370-1078
ahpayables@auburnhills.org

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENT (ACH)

Please select one of the following:

_____ First time request for ACH payments

_____ Request to change ACH payment information

The following bank information applies to:

Vendor's Account Number*: _____

Vendor Name: _____

Address: _____

City: _____ State: _____ Zip: _____

* This would be your account reference number for the City of Auburn Hills' account in your system, which would come through with our payment.

Bank Account Information: I hereby authorize the City of Auburn Hills to initiate deposits to the Checking Account (No Savings Accounts) described below:

Bank Name: _____

Address: _____

City: _____

Routing/ABA #: _____

Bank Account #: _____

Deposit Notification Information: I hereby authorize the following individual to receive notification via email of payment *details of all funds deposited* to the above account:

Name (Printed or Typed): _____

Email Address: _____

Title: _____

Phone #: _____

Term: This authority will remain in full force and effect until the City of Auburn Hills has received written notification of discontinuation and in such manner as to afford the City of Auburn Hills and Depository a reasonable opportunity to act on it.

Officer Name (Printed or Typed): _____

Signature: _____ Title: _____

Phone#: _____ Date: _____