

CITY OF ROUND ROCK

Vendor Direct Deposit Authorization Form

PRENOTE TEST: A prenote test will be sent to your financial institution to verify your account information provided.

BANK NAME:	
IMPORTANT: Your <u>Direct Deposit Routing Number</u> may be different from the account information printed on your checks. It is recommended that you contact your financial institution to confirm your direct deposit account information.	
DIRECT DEPOSIT ROUTING NUMBER:	
ACCOUNT NUMBER:	
TYPE OF ACCOUNT:	Checking Savings
An email notification will be sent when an ACH Direct Deposit is processed. Please provide contact information.	
NAME OF PERSON TO NOTIFY:	
PERSON'S EMAIL ADDRESS:	
PERSON'S PHONE NUMBER:	
VENDOR'S MAILING ADDRESS:	
NAME OF VENDOR:	
TAXPAYER IDENTIFICATION NUMBER(TIN):	
Authorization for Setup: I authorize the City of Round Rock to deposition of the City of Round Rock to my financial institution elect understand that the City of Round Rock will reverse any payments may account in error.	tronically.
Authorized Account Owner's Signature Vendor Number (if	known) or email to: _APteam@roundrocktexas.gov
Authorized Account Owner's Printed Name Date	Phone: 512-218-5400