



NCCER Direct Deposit Registration for Vendors

To enroll in direct deposit of your expense reimbursements, please complete this form and return it to the Finance Department.

Attach a voided check

Scan & email to: ap-ar@nccer.org or **Mail to:** 13614 Progress Blvd or **Fax to:** 386-518-6303 ATTN: Finance
Alachua, FL 32615

**** Not all financial institutions offer direct deposit service, so verify with your bank.****

Account Information

Bank Name/City/State: _____

Routing/Transit #: _____

Account Number: _____

Checking Savings

You, the vendor, are responsible for giving NCCER accurate bank transit numbers and individual account numbers. You are also responsible for verifying that the funds are in your account before drawing on them. NCCER will not be responsible for bank charges, lost interest, or other damages due to your bank's posting error.

By signing below, you authorize NCCER to deposit any amount owed to you by initializing credit entries to your account at the financial institution indicated on this form. Further, you authorize the bank listed above to accept and to credit any credit entries indicated by NCCER to your accounts. In the event that NCCER deposits funds erroneously into your account, you authorize NCCER to debit your account for any amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until NCCER has received written notice from you of its termination and at such time and in such manner as to afford NCCER and your bank reasonable opportunity to act on the request.

Vendor Name _____ Email Address _____

Vendor Signature _____ Date _____

Vendor # (Internal use only) _____

Date Processed _____

Initial