

Attn: e-Payment Promotions E-mail: claims.pin@cpa.state.tx.us FAX number: (512) 475-5424

NEW SETUP DIRECT DEPOSIT / ADVANCE PAYMENT NOTIFICATION AUTHORIZATION FORM

For Comptroller's use only							
SEE INSTRUCTIONS ON BACK.							

A VOIDED CHECK MUST BE ATTACHED

												J						
VEN	NDOR / PAYEE INFORMATION																	
	Texas Identification Number:												Mail Co		,,,,			
_	(Payee Number, SSN or EIN) (Agency Use ONLY) (Agency Use ONLY) (Agency Use ONLY)																	
ION																		
SECTION 1	Vendor contact name (Required for vendor) Title (Re				e (Requi	Cequired for vendor)					Con	ontact phone number <i>(Required)</i>						
	Payment address (Required)				Cit	City (Required)				,	State	te (Req.) ZIP Code (Require				d)		
FIN	ANCIAL INSTITUTION INFORMA	TION												'				
	Financial institution name (Bank name) (Re	quired)						City							St	tate		
	Routing transit number (9 digits)			Cust	omer ac	count nu	umber (maxim	um 17 di	gits)								
SECTION 2																		
		Ty	pe of a	ccount		Check	ing		Saving	s								
SE	Financial representative name						Title											
	Financial representative signature				Ph (Phone number (Required)						Date (Required)						
Δ11	THORIZATION FOR DIRECT DEP	OSIT SE	TUP		'								'					
SECTION 3	I authorize the Comptroller of Public Accounts to deposit my payments from the state of Texas to my financial institution electronically. I further understand that the Comptroller of Public Accounts will reverse any payments made to my account in error. I also agree to comply with the National Automated Clearing House Association's rules and the Texas Comptroller of Public Accounts' rules for electronic payments at all times.																	
••	sign Authorized signature (Required here	Authorized signature (Required)				Printed name (Required)							Date	(Require	ed)			
–– AU	THORIZATION FOR ADVANCE PA	YMENT	NOTI	FICATI	ON SE	TUP												
4 N	By completing this section, I authoriz number designated below. I understa public disclosure.																	
SECTION	Please indicate which method you w	Please indicate which method you want to receive payment notification by providing either an e-mail address or FAX number.																
SEC	E-mail:						_	F.	AX num	_{ber:} (_)						
	I wish to see my payment remittance	informati	on on	my notifi	ications	s? [YE	s	_ NO									
	er Ch. 559, Government Code, you are ent ernment Code. To request information for rev									-		ı limite	d except	ions in a	ccor	dance v	vith Ch	. 55
Ple	ease return your completed form	to:									AGE	ENC	Y USE	ONLY	′			
TEXAS COMPTROLLER OF PUBLIC ACCOUNTS Fiscal Management - Direct Deposit Program					Processed:												_	
P.O. Box 13528 Austin, TX 78711-3528							Pro	cessed	l:			Da	ate:				_	

Phone number: (512) 936-8138

Comments:

INSTRUCTIONS FOR NEW SETUP DIRECT DEPOSIT/ADVANCE PAYMENT NOTIFICATION AUTHORIZATION FORM

SECTION 1: VENDOR/PAYEE INFORMATION

Texas Identification Number: (Payee Number, SSN or EIN)

Enter your 11-digit Texas Identification Number or your 9-digit Social Security number (SSN) or Employer Identification Number (EIN).

MAIL CODE (Optional)

Enter your 3-digit mail code address identifier if known.

VENDOR CONTACT NAME (Required for Vendor)

Enter the name of the person that can be contacted for assistance as needed.

TITLE

Enter the title of the VENDOR CONTACT.

SECTION 2: FINANCIAL INSTITUTION INFORMATION

Section 2 is recommended to be completed by a financial institution.

NOTE: Alterations to routing, account number and/or type of account must be initialed by the financial institution representative or the payee.

SECTION 3: AUTHORIZATION FOR DIRECT DEPOSIT SETUP

The individual authorizing the direct deposit setup must sign, print their name and date the form.

SECTION 4: AUTHORIZATION FOR ADVANCE PAYMENT NOTIFICATION SETUP

Receiving your state payments by direct deposit also enables you to take advantage of our Advance Payment Notification option. Notifications can be sent by e-mail or FAX, and provides one (1) business day advance notice prior to your payment posting to your bank account. You may also choose to have your payment remittance information included. To sign-up simply complete Section 4.