



**National Trust for Historic Preservation
Electronic Funds Transfer (EFT) &
Direct Deposit Authorization Agreement**

For National Trust Vendors

Vendor Name _____ Vendor # _____

Daytime Telephone # _____

Email Address _____
(Required for payment notification)

Please validate with your financial institution your
BANK ROUTING NUMBERS and ACCOUNT NUMBER for direct deposit.

→ **Attach void check or copy (Please-no deposit slips for checking accounts)** ←

- NEW - CHANGE - CANCEL

Bank Name _____ City / State _____

Bank ABA # _____ Bank Telephone # _____
(Routing number)

Account # _____ - CHECKING - SAVINGS

Payments cannot be split between multiple accounts.

Authorization

I hereby authorize NTHP to deposit non-wage credits to the designated financial institutions(s) and account(s) listed above. I further authorize NTHP to debit account(s) as such financial institution(s) listed above, in the event of any error to any such deposit credits.

I have read the above information and I understand my obligations in maintaining the account information.

Vendor Signature

Date

It is the responsibility of the vendor to verify the above information for accuracy. Please contact the Finance Accounts Payable office immediately if you find a discrepancy or require account updates.