MANUAL CEFT INPUT INFORMATION

Payee Name_____

SSN _____ EIN _____

Corporate Status Code (see attached list) _____2J_____

Payee **MAILING** Address_____

Payee Phone: _____

Payee Email Address_____

EFT Format: CTX

FINANCIAL INSTITUTION INFORMATION

ACH Bank Name _____

ACH Bank Address _____

_____

ACH Bank Telephone Number _____

ACH Nine-Digit Routing Transit Number_____

Depositor Account Number _____

Type of Account (checking or savings) _____

Account Holder's Name_____

Account Holder's Signature _____