



**Instructions:** Fill out this form, print and sign and either:

1. Scan and email as an attachment to [TWUVendor@twu.edu](mailto:TWUVendor@twu.edu)
2. Fax to (940) 898-3519

**TRANSACTION TYPE**

<input type="checkbox"/> New Setup	<input type="checkbox"/> Change Financial Institution
<input type="checkbox"/> Cancellation	<input type="checkbox"/> Change Account Number
	<input type="checkbox"/> Change Account Type

**PAYEE INFORMATION**

<input type="text"/>	<input type="text"/>	<input type="text"/>
Employee Identification #	Employee Name	Business Phone

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Remit Address	City	State	Zip Code

**FINANCIAL INSTITUTION INFORMATION**

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	City	State
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Routing Transit Number	Account Number	Account Type

**AUTHORIZATION**

I hereby authorize Texas Woman's University (TWU) and the depository named above to initiate direct deposit (credit) entries and correction (debit) entries to the depository account listed above. This authorization will remain in effect until Procurement and Contract Services receives written notification of cancellation.

_____	_____
Authorized Signature	Date
_____	_____
Printed Name and Title	Remittance Email Address

**\*\*\*\*\* PLEASE ATTACH A VOIDED CHECK (NOT A DEPOSIT SLIP) TO THIS FORM BELOW \*\*\*\*\***