

Updated March 5, 2010

TO: All Vendors

SUBJECT: Automated Payments through ACH

The County of Harnett is pleased to announce the implementation of automated invoice payments for all vendors. This process will mean that as a vendor, you can choose the option of receiving your invoice payments through ACH (Automated Clearing House). Using ACH, our payment to you will be deposited directly into a checking account specified by you on the attached form. We trust that you will find this process beneficial, as payments will be received sooner than with our current check process.

Please find an attached form requesting information needed to facilitate this process. Once we receive the completed form, our system will be updated with the information provided. As each payment is processed, we will send an email notifying you that a deposit has been made to the account you specified. It is imperative that the email notification is sent to the person who will use the information provided to credit our account with your company. Automatic payments will be processed weekly as the check payments are now.

Please take a moment to complete the attached form. We need *all* information on the form to be completed. *We hope that you choose to take advantage of this convenient and fast form of invoice payment.* Once your information is received and processed in our system, automatic payments to you will begin. Please remember, this is not for wire transfers, but for ACH.

Please return the completed form to Amanda Duntz at ap@harnett.org, or via fax to 910-893-3445.

Should you have any questions, please do not hesitate to call (910) 893-7557.

County of Harnett
P.O. Box 760, Lillington, NC 27546
Phone (910)893-7557 Fax (910)893-3445
ap@harnett.org

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENT (ACH)

Please select one of the following:

___ First time request for ACH payments ___ Request to change ACH payment information

The following bank information applies to:

Vendor Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Bank Account Information: I hereby authorize the County of Harnett to initiate deposits to the Checking Account described below: **(No Savings Accounts)**

Bank Name: _____

Address: _____

City: _____

Routing/ABA# & Bank Acct # _____

Deposit Notification Information: I hereby authorize the following individual to receive notification via email of payment ***details of all funds deposited*** to the above account:

1. Name (Printed or Typed): _____
- Email Address: _____
- Title: _____
- Phone #: _____

Term: This authority will remain in full force and effect until the County of Harnett has received written notification of discontinuation and in such manner as to afford the County of Harnett and Depository a reasonable opportunity to act on it.

Officer Name (Printed or Typed) _____

Signature: _____ Title: _____
Phone #: _____ Date: _____