

Form 3401 FR.02 Supplier Payment Setup: ACH/EFT

Revised 6/30/2020

Instructions:

- Use this form to provide the necessary information to establish ACH/EFT as a payment method, or to change previously provided information, for the Supplier identified in Section 2, below.
- Complete all sections of this form. If any information is handwritten, please write legibly. Incomplete or illegible forms will not be accepted.
- Once all necessary information is obtained, the Yale department (not the Supplier) making the request should submit the completed form and all required attachments as follows:
 - · For new Suppliers, attach all documentation to the Create Supplier Request in Workday; or
 - o For existing Suppliers, attach all documentation in an email to supplier.change@yale.edu.

Section 1: Request Information									
Select one: ☐ Add ☐ Update / Change ☐ Inactivate									
Section 2: Supplier Information									
Supplier name (company or individual):						t (if exis	sting):		
Contact name (for compar	Email:			•					
Phone: Federal Employer ID (TIN/EIN) or Social Security Number (last 4 digits) (if applicable):									
Remit-to email:	Street address:								
City:		State:	e: Zip code:						
Section 3: Supplier Financial Information									
Name of financial institution:						Ph	one:		
Account type: ☐ Chec	king □ Savings □ Oth	er:	Account #:	Routing #:			<u> </u>		
Section 4: Paguired Attachments									
Section 4: Required Attachments To complete this request colors and attach one of the following:									
To complete this request, select and attach one of the following:									
□ A. Bank statement header: a copy of the top 1/3 of the first page of the monthly bank statement. Can be either the paper or electronic following: □ C. Signed bank letter: a letter from the bank that includes all the									
statement. Must include <i>all</i> the following: • Bank name and bank logo;									
Bank name and bank logo; Supplier name and bank account number;									
Supplier name and bank account number; and Bank signature or bank stamp; and									
ABA routing number (preferable). ABA routing number (preferable).									
□ B. Void check: a copy of a void check, a check image, or an □ D. Other bank documents submissions of other bank documents are									
□ B. Void check: a copy of a void check, a check image, or an electronic check. Must include all the following: □ D. Other bank document: submissions of other bank documents are subject to review. Must include all the following:									
Bank name and to		Bank name and bank logo;							
 Supplier name; a 	Supplier name and bank account number;								
Supplier bank account number and ABA routing number in Bank signature, bank stamp, or bank URL; and								nd	
the MICR line at bottom of check.				ABA routing number (preferable).					
Note: all documents must be dated within the previous six months. Information provided on this form must match the information on the attachment(s) provided; requests that do not match will be returned.									
Section 5: Authorization									
• Account changes must be reported to Yale Shared Services ("YSS") (via the Yale department) thirty (30) days prior to the effective date.									
All EFT accounts are tied to an address in our system; a form is required for each address (if needed). The entity/individual listed ("Supplier") hereby authorizes VSS to initiate credit entries to its accounts in the financial institution identified above.									
• The entity/individual listed ("Supplier") hereby authorizes YSS to initiate credit entries to its accounts in the financial institution identified above. Additionally, this form provides YSS the authority to debit any erroneous credit or transfers to the account in the amount of the transfer.									
Supplier signature below confirms accuracy of the information contained herein.									
Supplier representative n	ame (print):				Ph	one:			
Supplier representative signature:					Da	te:			
Yale requestor name (prin	nt):				Ph	one:			
Yale requestor signature:					Da	te:			