Dear City of Sacramento Accounts Payables Supplier,

City of Sacramento is now offering ACH (Automated Clearing House) payments.

**What is ACH Payment?**
ACH payments are electronic payments that will be sent to your bank account instead of you getting a physical check in the mail from the City.

**Is there a charge for this ACH Payment?**
There is no charge for this service from City of Sacramento.

**What is the benefit of signing up for ACH?**
The benefit of signing up for the ACH payment program is that your payment(s) will be directly deposited to your bank account instead of the time it takes you today to receive the check in the mail from City of Sacramento.

**How will I know when I get paid?**
City of Sacramento will email a payment advice to your email address provided on the signup form upon payment processing. The payment advice will provide details of payments sent to your bank account.

**How do I sign up?**
Signing up is easy. Please complete the enrollment form on the other side of this page and either:

1. **Email it back to:** ACH@cityofsacramento.org
2. **Fax it to:** 916-808-5444
3. **Postal mail it to:** City of Sacramento
   
   Attention: Accounts Payables, 4th Floor (ACH Signup)
   
   915 I Street
   
   Sacramento, CA 95814

Please ensure that the form is completely filled out and a voided check/voided deposit slip (for savings account) is attached. Consult your bank if you are not sure how to obtain the bank information requested on the sign-up form. The form should be signed by an authorized representative who can conduct financial transactions on behalf of the business.

Call Sharina Bali, Accounts Payables Supervisor @ 916-808-5835 if you have any further questions.

Accounting Division
PH: 916-808-5495
Fax: 916-808-5444

915 I Street, 4th Floor
Sacramento, CA 95814
CITY OF SACRAMENTO

ACH Authorization Form-Accounts Payables

☐ ENROLLMENT  ☐ CHANGE  ☐ CANCELLATION

Complete this form to enroll /change or cancel the electronic deposit program

Please print the following information clearly

YOUR NAME: ____________________________________________
First Name MI Last Name Title Phone #
(This individual should be an authorized representative who can conduct financial transactions on behalf of the business).

BUSINESS NAME (If Applicable): ______________________________

Email Address (for payment notification): ________________________________

LAST FOUR DIGITS OF TAXPAYER IDENTIFICATION NUMBER (for verification purpose):

Social Security Number (SSN) or Employer Identification Number (EIN): ___________ ___________ ___________ ___________

YOUR FINANCIAL INSTITUTION (Bank, Savings and Loan, Credit Union)

INSTITUTION NAME: _______________________________________

ACCOUNT TYPE: ☐ For a checking account, enter C. Attach a voided check for that account to this form.
☐ For a savings account, enter S. Attach a voided deposit slip for that account to this form.

Bank Account Number: ______________________________________

Nine Digit Routing Number: __________________________________

I hereby authorize the City of Sacramento to initiate deposits (credits) and/or corrections to the previous deposits to the institutions indicated above. The financial institution is authorized to credit and/or correct the amounts to my account. This authorization is to remain in effect until I revoke it by giving 20 days prior notice in writing to the City of Sacramento.

Authorized Supplier’s Signature, Print Name & Title ________________________________ Date ______________________

Forward completed form with a voided check to City of Sacramento.

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2. Fax it to: 916-808-5444 or
3. Postal mail it to: City of Sacramento
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   915 I Street, Sacramento CA 95814