

Electronic Funds Transfer (EFT)

Payment Setup Form

Carnegie Mellon encourages the use of electronic payments. Electronic payments are more secure and reliable than payments made via paper check. Remittance information is distributed for all payments as long as CMU has a current and valid e-mail address on file.

Region: Select US if located within one of the 50 states, otherwise select International.

Request Type: Select "Initiate" if this is the first time submitting bank information for payment or select "Alter" if a change is needed to bank information previously submitted.

Supplier/Payee Information: All fields in this section are required.

Bank Information: Bank Name, Address, City, State, Zip Code, Country, and Account Type are all required if applicable (for example, some countries do not have states or zip codes).

DOMESTIC ONLY information must be completed for banks located within the United States.

INTERNATIONAL ONLY information must be completed for banks located outside the United States.

Currency Type: Identifies the currency in which payments are to be received.

Remittance: Optional. This field can be used to provide additional e-mail addresses that should receive remittance information.

Purpose of This Form: The purpose of this form is to offer payment options in US dollars as well as in campus local currencies to its international suppliers that wish to receive payment for goods and services through electronic funds transfer. This form can also be used for non-employee expense report and non-qualified scholarship (NQS) payees who wish to receive payment through electronic funds transfer. The advantage to this form of payment is funds are electronically deposited directly into the payees' designated bank account through ACH (Automated Clearing House).

For instructions on completing this form, click [HERE](#).

Please select your region: US International Request Type (check one): Initiate Alter

Supplier/Payee Information

Supplier/Payee Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Contact Name: _____ Contact Phone #: _____

E-mail (required): _____

Bank Information

Bank Name: _____ Bank Account Type: Savings Checking

Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____

DOMESTIC ONLY: Bank Routing Number: _____ Bank Account Number: _____

INTERNATIONAL ONLY: Bank Account Number: _____
Note: Supplier banks which have adopted the ISO International Bank Account Number (IBAN) standard must ensure a complete IBAN number is provided in the account number line. For example, Qatar IBAN numbers are 29 digits in the following format: QAKK QNBA 0000 0000 1234 123456 123.

S.W.I.F.T. Code (8 or 11 characters): _____

BSB Number (AUS Only): _____ Sort Code (UK Only): _____

Currency Type: _____

Remittance

Please enter email address for remittance: _____

Signature & Agreement: By signing this form, Supplier/Payee agrees that the information provided on this form is true and correct. The Supplier/Payee agrees to timely submit updated information in the event the information provided is no longer true and correct by completing and returning to CMU an updated Supplier Information Form.

Signature of Supplier/Payee Authorized Representative **Name (Printed or Typed)** **Date**

Title **E-Mail Address** **Phone Number**

Official Use Only

Reviewed by: _____ Date: _____

Maintained by: _____ Ledger: _____

Bank in EPLS? Yes No

Fax to:
Accounts Payable
412-268-2206