

# HIDE-A-WAY LAKE CLUB, INC. VENDOR EFT PAYMENT AUTHORIZATION FORM

#### Schedule your payment to be electronically deposited into your checking or savings account. Just complete and sign this form to get started!

EFT is a free and secure way for you to receive your payments faster. You will no longer have to wait for checks to arrive in the mail then have to manually deposit it into your bank account. In lieu of receiving a physical paper check for goods and/or services provided to Hide-A-Way Lake Club, Inc., your company's payment will be sent via electronic transfer and automatically credited to your account at your financial institution.

To take advantage of this, simply complete this form and return it to us along with a voided check/deposit slip.

EFT Action Requested (check one)		
□ Start	□ Change	□ Cancel
*IMPORTANT: For a start or change request, attach a voided check with completed form.		

 Vendor Information

 Vendor Name:

 Vendor Address:

 SSN or Taxpayer ID #:

### **Vendor Contact Information**

Primary EFT Contact Name:

Email Address:

Phone #:

Fax#:

### Financial Institution Information

Financial Institution Name:

Routing Transit # (9 digits):

Account #:

### Vendor Authorization -

Signature of Authorized Official:\_\_\_\_\_\_ Date:\_\_\_\_\_\_ Date:\_\_\_\_\_ Date:\_\_\_\_\_\_ Date:\_\_\_\_\_ Date:\_\_\_\_\_\_ Date:\_\_\_\_\_\_ Date:\_\_\_\_\_\_ Date:\_\_\_\_\_ Date:\_\_\_\_\_ Date:\_\_\_\_\_\_ Date:\_\_\_\_\_ Date:\_\_\_\_ Date:\_\_\_\_ Date:\_\_\_\_\_ Date:

# \*\*For HAWL Office Use\*\*

Vendor ID#:

GP Updated (Employee Initials and Date):