

Council on Culture & Arts Electronic Payment Initiative

Dear Valued Organization:

Council on Culture & Arts (COCA) is beginning the process of switching all current vendors from check to electronic payments. As part of this important initiative, we ask that your organization accept future payments electronically, rather than by check. The electronic payment option is through:

ACH (Direct Deposit)

With direct deposit, payments are made electronically by ACH directly to the payee's bank account. This change will simplify your processes, provide you with faster invoice payment, detailed remittance information, and improved cash flow. There are no fees at this time associated with ACH (direct deposit) payments, and the standard 30 day payment terms apply.

Direct deposit is:

- ✓ Quick No mail time, funds are immediately available on deposit
- ✓ Convenient no cost and no worry about getting to the bank to make a deposit
- ✓ **Secure –** no paper checks to handle, it won't get misplaced, lost or stolen

If you are interested in setting up direct deposit, here is the process:

- 1. Read the Terms and Conditions.
- 2. Fill out the included Direct Deposit Payment Authorization.
- 3. Email it to COCA at nick@tallahasseearts.org.
- 4. Direct deposit begins and all payments to the payee will be sent by ACH.

If you have any questions on how to prepare the form, or require additional information please call 850-264-7943.

Sincerely,

Kathleen Spehar Executive Director

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Accounts Payable Direct Deposit Payment Authorization Form

Directions

- 1. The form must be typed and submitted electronically.
- 2. Payments will be made using ACH (Direct Deposit).
- 3. Payees must submit a new form with updates if account information changes.
- 4. Assistance is available by calling COCA at 850-264-7943.

NOTE: This form only authorizes payment from COCA.

New Enrollment Up	odate Enrollm	nent 🔲	Cancel Enrollment
Payee Type: Grantee Vend	Vendor SS# or Federal Tax II		1
Payee Name:			
Street Address:			
City:	State:		Zip:
E-Mail:	Phone Numb		er:
Bank Name:			
Routing Transit Number Account Number			
(9 digit number on bottom left of check)			
Payee Certification			
By checking this box, I am confirming my electronic signature to authorize payments to be sent to the financial institution named above and deposited to the designated account. I have read and accept the Terms and Conditions for Direct Deposit Participation.			
Click to Email & Submit Form			
Or save this form and email to nick@tallahasseearts.org			

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Terms & Conditions for Direct Deposit Participation

Please Read This Carefully

The bank account information will remain confidential to the extent provided by law and necessary to make Direct Deposit payments. The requested information is required for processing payments through Direct Deposit.

This form authorizes COCA to initiate credit and, if necessary, debit entries and adjustments for any credit entries made in error to the account indicated, at the depository financial institution named, and to credit or debit the same from such account. This authority will remain in effect until cancelled in writing. Further, the origination of Automated Clearing House (ACH) transactions to the account must comply with the provisions of state and federal law and regulations.

This form only authorizes payment from COCA.

Information Found on Checks

Most of the information needed to complete this form is printed on your checks. Be sure that the payee's name is written exactly as it appears on the check. Direct deposits will not be made to an account held in a different name from the payee. Be sure current address is shown.

Cancellation

This authorization remains in effect until cancelled by the payee by resubmitting this form. Upon cancellation by the payee, the payee should also notify the receiving financial institution that the authorization has been cancelled. Additionally, COCA expressly reserves the right to discontinue Direct Deposit at any time.

This authorization may be cancelled by the financial institution by providing the payee a written notice 30 days in advance of the cancellation date. However, a cancellation by the financial institution for reason of fraud shall be effective immediately. The payee must immediately advise COCA Procurement Services if the authorization is cancelled by the financial institution.

Violation of these terms and conditions may cause, at a minimum, termination of participation in Direct Deposit.

Financial Institution Information and Certification

Provide the payee's account number, and account name or title exactly as they appears in the financial institution's records.

Changing Recipient's Financial Institution

The payee's direct deposit authorization will remain in effect until withdrawn in writing with sufficient notice to Procurement Services to allow adequate time to effect termination. COCA will not be responsible for any loss which may arise solely by reason of error, mistake or fraud regarding information provided on this Direct Deposit Payment Authorization form.

If the payee or authorized representative changes their financial institution, the payee must resubmit this form to COCA. Any changes to the existing direct deposit authorization, such as the bank account number, will cause the original authorization to be cancelled. A new Direct Deposit Payment Authorization form must be completed to re-enroll. It is recommended that the payee maintain the previously authorized account until the transition is complete.

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