



VENDOR ACH INFORMATION

Check Appropriate Box: New Vendor Change Request

The Waunakee Board of Education has a policy which requires all payments be made via ACH (electronic) payments into a banking account. In order to process payment to you, please:

- complete **all** fields on this form. Missing information will delay payment.
- use black ink and type or **print clearly** to avoid errors
- submit **both** ACH and W9 forms

BAA Confirmation
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please indicate the school/department you are working with (circle all that apply)		
4K • Arboretum • Heritage • Prairie • Intermediate • Middle • High • Athletics • Food Service • Summer School Business Services • Curriculum • Human Resources • Maintenance • Special Ed • Superintendent • Technology		
Vendor Name: <small>(must match W9)</small>		
Estimated Annual Payment(s) (check one)	<input type="checkbox"/> Less than \$5,000 <input type="checkbox"/> \$25,000+ <input type="checkbox"/> \$5,000 - \$24,999	Purpose of Payment <input type="checkbox"/> Service <input type="checkbox"/> Reimbursement <input type="checkbox"/> Product/Supply Order
Phone number:		
Email address : <small>(used to send email notification of payment)</small>	_____ @ _____ . _____	
Financial Institution:		
Routing Number:		
Account Number:		
Type of Account	<div style="text-align: center; margin-bottom: 5px;"><small>(check one)</small></div> <input type="checkbox"/> Checking <input type="checkbox"/> Savings <div style="text-align: center; margin-bottom: 5px;"><small>(check one)</small></div> <input type="checkbox"/> Personal <input type="checkbox"/> Business	
Signature		
Printed/Typed Name		
Title (for businesses)		

Joe Smith 1234
 1234 Anystreet Court
 Anycity, AA 12345
 Pay to the order of _____
 _____ Dollars
Bank Anywhere
 ⑆ 123456789 ⑆ 123456789123 ⑆ ⑆ 1234

Bank Routing Number
Bank Account Number
Check Number (Do not use)

Routing number is 9 digits surrounded by |; In some cases the order of the checking account number and the check number is reversed.

Please submit all required vendor documentation following the instructions provided by the requesting school/department.

Please allow up to 10 business days for processing once completed documents are received.

If any of your vendor information should change, please submit new ACH and W9 forms to the applicable school/department.

Please direct questions to the building/department requesting this information.

Thank you!

FOR BUSINESS OFFICE USE <input type="checkbox"/> Confirm BAA Review <input type="checkbox"/> Vendor Rubric <input type="checkbox"/> 1099 Vendor Y N <input type="checkbox"/> ACH Entered <input type="checkbox"/> Attachment(s) <input type="checkbox"/> Confirmation to BAA
