



Payment information will be provided to the charter school in the form of an e-mail notification.

Attach a VOIDED check to verify bank details and routing number. <u>Upload completed form at least annually to</u> Charter Tools benchmark titled "ACH Deposit Form, Vendor Record Form 1841 and W-9". (**Do not fax or email confidential information**)

Charter School Name				School Number	
Account Name (if different)				Federal Tax ID#	
Accounts Receivable (AR) Contact	AR E-mail Address			AR Phone #	
Financial Institution Name			Financial Institution Contact Phone #		
City			State	Zip	
Account # Routing #					
Check action requested:  New Update Existing	☐ Cancel	☐ No Changes			
I certify that the information I provided provided for direct deposit transaction School and is held in the same legal in hereby authorize The School District entries to the account and financial correct errors, if any. This authorizatio County has received written notification School District of Palm Beach County	is. I certify that the name of the Charte of Palm Beach Constitution listed a on is to remain in further from the of its	e bank account is he r School and I am e bunty to initiate ACH bove. I further authout Ill force and effect un termination in such	ld and contitled to I (Automatic adjustments)  I till The Son time an	ontrolled only by the Charter provide this authorization. I ated Clearing House) credit usting entries (reversals) to chool District of Palm Beach d manner as to afford The	
I agree to hold The School District of F or incomplete information provided on funds to my account.					
I acknowledge that the origination of U.S. Law.	ACH transactions	to the above accoun	it must co	omply with the provisions of	
	Signature of ac	tive Charter School Go	overning B	Board Chair Date	
	Print Name				