SAN DIEGO STATE UNIVERSITY

Research Foundation

ACCOUNTS PAYABLE DIRECT DEPOSIT AUTHORIZATION AGREEMENT

I (we) hereby authorize SDSU Research Foundation to initiate credit entries (direct deposit) and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) Checking or Savings account indicated below and the depository institution named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account. I also certify that the Routing/ABA and account numbers provided below belong to me and are correct.

Name & Vendor Information

Individual Name or Company Name:	SDSU Red ID or Federal ID (if applicable):
Street Address:	
City: State: Zip Code:	
Telephone: Fax Number:	
SDSU E-Mail Address (notice of direct deposit will be sent here):	
Other E-Mail:	
Company Contact Name (if applicable):	

This authority is to remain in full force and effect until the research foundation has received written notification from me/us of its termination in such time and in such manner as to afford the research foundation and Depository a reasonable opportunity to act on it.

Banking Information

Bank Name:	Branch Phone Number:
Routing Transit/ABA number:	
Confirm Routing Transit/ABA number:	
Account number:	
Confirm Account number:	
☐ Checking OR ☐ Savings	

(A sample check is on the following page to assist you in locating your bank routing/transit number and your account number.)

REQUIRED: A voided check or other supporting bank document with both the routing number AND account number included, MUST be attached to this form.
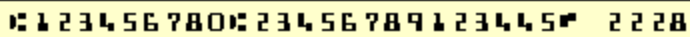
Signature: _____   Date: _____

Protecting your information is important to SDSU Research Foundation.

This form can be submitted securely through the AdobeSign web form or:
faxed to this secure fax number (619) 594-3177 or mailed to the following address:
San Diego State University Research Foundation
Attn: Accounts Payable - 4th Floor
5250 Campanile Drive
San Diego, CA 92182-1941
Phone: (619) 594-6891

Note: please do not e-mail your personal information

N. E. Student
2300 Mariner Square Drive
San Francisco, CA 95102

2228

Date _____

Pay To
The Order Of _____ $ [_____]

_____ Dollars

_____

⑈123456780⑈ 23456789123445⑆ 2228

⑈123456780⑈ 23456789123445⑆ 2228

Routing/Transit Number   **Account Number**   **Check Number**