

## City of Huntington Beach Electronic Credit Authorization Form (ACH)

New Appl	Cation   C	_	Retiree	☐ Cancel ACH	
Vendor/Retiree Name:			Tax ID	/Social Security No.	
Mailing Address:					
City:		State:	Zip Co	de.	
Telephone Number:	I	Fax Number	:		
E-mail Address:	7	Web Site Ac	ldress:		
Vendor Contact Name:	L				
Vendor/Retiree Signature				Date	
<ul> <li>☐ Checking – Copy of voided check is MANDATORY</li> <li>☐ Savings – Complete Financial Institution Information Below</li> </ul>					
Bank Name:					
Bank Address:					
City:		State	:	Zip Code:	
Bank Contact:		1			
Contact Telephone Number:					
Nine Digit Bank ABA Number:					
Depositor Account Name:					
Depositor Account Number:					
Signature of authorized bank official:	Title:			Date:	
Finance I Huntir	ntact Joyce Zack Leturn completed City of Huntingto Department – Je P.O. Box 1 ngton Beach, CA	l form to: on Beach onnifer Ande 90	erson	at (714) 536-5990.	
Internal Use Only  Supplier #			Fi	nance Input By:	
Rec'd by Finance Dept: Pre-Note Processed:					