



## ACH VENDOR PAYMENT PROCESSING

To streamline payment processing, United Arts is migrating to ACH payment processing for grantees. ACH payments will be available for all of United Arts' grant programs as well as **Orange County's grant programs through TDT funding**, and OrlandoAtPlay.com ticketing. ACH payments will reduce internal processing costs (time, paper and postage costs), more efficiently transmit funds, and reduce the number of checks that are not deposited by the recipient. This will also reduce deposit and banking time and costs on the recipients end and the funds will be available sooner.

To participate, please fill out the attached *Direct Deposit Via ACH* form and return it with a cancelled check copy to Juliana Steele, VP of Admin & CFO, for United Arts of Central Florida, either by:

- 1) Fax: 407-628-9110, or
- 2) Mail: United Arts of Central Florida  
Attn: Juliana Steele, VP of Admin & CFO  
2450 Maitland Center Parkway, Suite 201  
Maitland, FL 32751

To ensure the security of your information, please do not email the completed form.

Participation is optional, but encouraged. If you elect to continue receiving paper checks, please note that we will be reducing our paper check runs, so this may delay your payment.

Once I have received your ACH form, I will notify the contact person on the form via email when their ACH account is live.

The designated contact person will receive and email with the dollar amount and remittance amount of the ACH payment being made prior to each payment.

If you have questions or concerns on ACH payments, please contact Juliana Steele directly.

Thank you. I look forward to receiving your enrollment.

Juliana Steele

**BUSINESSDIRECT DEPOSIT VIA ACH  
(ACH CREDIT)**

**Check one:**       Begin ACH Deposit     Change Information     Terminate ACH

Organization Name: \_\_\_\_\_

Organizations Address: \_\_\_\_\_

Contact Name/Title: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Authorized Signer Name: \_\_\_\_\_ Phone: \_\_\_\_\_

ORGANIZATION will be notified via email of ACH payments. Please supply an email address that you would like ACH notifications to go to: \_\_\_\_\_

Account type (select one only):  Business CheckingAccount       Business SavingsAccount

at the depository financial institution ("DEPOSITORY") named below. **Please attach a cancelled check.**

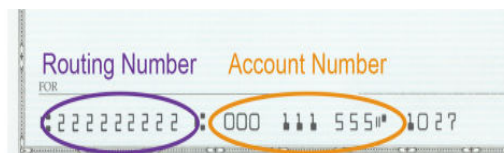
Depository Name \_\_\_\_\_

Branch Address: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Name on the Account \_\_\_\_\_



ORGANIZATION hereby authorizes United Arts of Central Florida, Inc. ("UNITED ARTS") to electronically credit the ORGANIZATION'S account (and, if necessary, to electronically debit the ORGANIZATION'S account to correct erroneous credits) for payments due the ORGANIZATION. ORGANIZATION agrees that ACH transactions the ORGANIZATION authorizes comply with all applicable laws.

ORGANIZATION understands that this authorization will remain in full force and effect until the ORGANIZATION notifies UNITED ARTS that they wish to revoke this authorization by submitting this form with the option to terminate the ACH checked. ORGANIZATION understands that UNITED ARTS requires 5 business days prior notice to cancel this authorization.

Name: \_\_\_\_\_  
(Please Print)

Authorized Signer Signature: \_\_\_\_\_ Date: \_\_\_\_\_