

## Instructions for Reimbursements via Direct Deposit (ACH)

Research Foundation employees have long enjoyed the convenience of direct deposit of their payroll checks from Human Resources...now the RF has expanded this convenient payroll option to include reimbursements made through Research Foundation Purchasing Services. Now by simply following a few simple steps compensation for your travel expenses as well as all other reimbursements paid to you via the Oracle Accounts Payable module, can be directly deposited to any bank account you specify. Now you can virtually eliminate waiting in line to cash or deposit checks, practically eliminate bank hold time, avoid the possibility of lost or stolen checks, and do your part for the environment by reducing paper waste and receiving electronic notification of payments.

Here's all you need to do to get started.

Complete the "ACH Payment enrollment Form", print it, sign it, and mail it to:

Research Foundation of SUNY  
Finance Office  
Attn: Theresa Conroy  
P.O. Box 9  
Albany, New York 12201-0009

Or fax it to: 518-935-6710

It is just that simple.

The check image and the table below provide guidance on the information to enter for each field on the form.

The diagram shows a check form with the following fields and labels:

- Bank Name and Address**: A bracket on the left side of the form encompasses the top section.
- My Name**: 101
- My Address**: 50-9999/9999 1
- My City, State, & Zip**: \_\_\_\_\_ 20 \_\_\_\_\_
- Pay to the order of**: \_\_\_\_\_ \$ \_\_\_\_\_ Dollars
- The Bank Name**: \_\_\_\_\_
- Bank Address**: \_\_\_\_\_
- Routing Number**: It 123456789 It
- Account Number**: 12 34567890 It 101

9 Digit Bank Routing Number      Your Account Number

Supplier ( <i>your</i> ) Name	Your name as it appears in the Supplier File (example: First MI Last)
SSN, TIN or Employee Id	Social Security Number, Tax Identification Number, or for RF employees, if you prefer, you can use your employee number as it appears on your pay slip
Telephone Number	Use number that is best for reaching you during regular business hours
Name and Address of Financial Institution	Name and address of your bank as shown on the sample check above
Bank Routing Number	9 digit bank routing number of your bank as shown on the sample check above
Account Type	Checking or savings type account
Account Number	Your account number as shown on the sample check above
Supplier Certification	By checking the check box you agree to receive supplier payments via direct deposit to your bank account
Signature	For NEW and transaction CHANGES stop here and print and sign the form, then mail to the address above
Date	Date the form was completed
E-mail	Please provide a valid e-mail address to reach you
<b>Section 2 (to be completed to cancel enrollment only).</b>	
Signature	To CANCEL an existing ACH enrollment, print, sign this section of the form and mail to the address above
Date	Enter the date the form was completed

## Some things to keep in mind

### Security of the Information you provide

The information on this form is confidential and is required to process payment data from the Research Foundation of SUNY (RF) to your financial institution. Please rest assured that the Research Foundation Office of the Treasurer in Albany has controls in place to insure that the information provided on the form is kept confidential. This form is available on the Research Foundation Central Office website, where there is an option to complete this form on-line. While you certainly have this option, we would caution you that when you select the "submit

by e-mail” button you are passing information across the public internet. Sensitive data (in this case SSN and banking information) should always be encrypted before it is transmitted, and standard e-mail does not provide this functionality.

### Your Responsibilities

- ✓ You are responsible for verifying (with your bank) the accuracy of your bank account number when an enrollment form is completed
- ✓ You are responsible for notifying the Research Foundation if you change banks or an account number. In either case, you must complete a new ACH Payment Enrollment Form and begin the ACH payment again
- ✓ You must complete an ACH Payment Enrollment Form to cancel an ACH payment
- ✓ You are responsible for payment of any charges that may be incurred against your account as a result of receiving an ACH payment
- ✓ You must repay the Research Foundation of SUNY if an overpayment occurs as the result of a payment via ACH.
- ✓ If you wish to change the financial institution into which you deposit funds, you must first cancel your ACH payment (see below), then complete a new enrollment form to start ACH payments with your new financial institution.
- ✓ You are responsible to review the pre-notification that is processed by the RF upon receipt of the ACH Payment Enrollment Form to verify banking information is correct. If any problems occur during the processing the pre-notification your payments will continue as they were prior to completing the ACH Payment Enrollment Form until corrections are made.

### Cancellation of ACH Payments

Payments will be made electronically via ACH until cancellation either by you or by the Research Foundation. The Research Foundation will cancel ACH payments on the effective date of a change of financial institution or account information, or if your status with the Research Foundation becomes inactive.

If you have additional questions please contact the Coordinator of Purchasing Services, Carol Julian at [julianca@buffalostate.edu](mailto:julianca@buffalostate.edu) or 716-878-4144.