

Disbursements Direct Deposit Authorization Form (ACH)

If you are a UCSD employee enrolled in Payroll Direct Deposit, you do not need to complete this form.

The University of California San Diego's (UCSD) method of issuing payment is to process a direct deposit to the payee's bank account via the Automated Clearing House (ACH) system. A confirmation document will be sent to you via email with the necessary information to identify the deposit. After payment has been issued to the designated financial institution, availability of funds is subject to the financial institution's policies. For additional information visit http://blink.ucsd.edu/buy-pay/payment-methods/direct-deposit/

	COne:New	Change	Discontinue Direct Deposit
Payee/ Supplier Name:			
(Last Nam	e, First Name, MI)		
Payee/Supplier Remit to Addre Must be United States physical add		nplete one ACH forr	n per remit to address:
Direct Deposit Confirmation Email Ad	ldress:		
	Please complete	one of the follo	owing options:
UCSD Employee ID:	Last Four Digits of S	SN:	Full FEIN:
(Required for employees)	(Individual/Sole Proprieto	orship)	(Company)
(Required for employees) United States Financial Institutio Bank Name:	n Information (Required):	<u> </u>	
United States Financial Institutio	n Information (Required):		
United States Financial Institutio	n Information (Required):	Account Numl	per:
United States Financial Institutio Bank Name: Routing Number: I hereby authorize University of Ca	n Information (Required):	Account Numl	per:
United States Financial Institutio Bank Name: Routing Number: I hereby authorize University of Ca (Select of This authority is to remain in full for such manner as to afford UCSD as	n Information (Required): Ilifornia, San Diego (UCSD) Ine)Checking_ Incree and in effect until UCSD Ind DEPOSITORY a reasonal.	Account Numl to initiate credit en Savings account has received written ble opportunity to act	per:
United States Financial Institutio Bank Name: Routing Number: I hereby authorize University of Ca (Select of This authority is to remain in full for such manner as to afford UCSD as into my account, I authorize	n Information (Required): Ilifornia, San Diego (UCSD) Ine)Checking_ Incree and in effect until UCSD Ind DEPOSITORY a reasonal, IUCSD to debit my account for	Account Number Account Number Account Account Account The Account	oer:

Please return the completed form to UCSD Disbursements, using one of the following options:

- 1. ASK (Category: Adding/Updating Suppliers or Payees; Sub-Category: Direct Deposit/ACH for Payees or Suppliers). If you do not have Single Sign-On access, email the form to <u>directdp@ucsd.edu</u>. <u>Enter "ACH Form Attached" in the subject line.</u>
- 2. Fax to Direct Deposit Request at: (858) 534-4621 For questions regarding the status of a direct deposit, or for help with making changes to your deposit account information, please submit inquiries to ASK. If you do not have Single Sign-On access, please contact us by email at directdp@ucsd.edu.