

Payee/Company Information

Company Name:

SJSU Research Foundation Accounts Payable 210 N. 4th Street, 4th Floor San Jose, CA 951132

(408) 924-1404 email: research-foundation-ap@sjsu.edu

Vendor ACH Enrollment Form

The Vendor ACH Enrollment Form is for existing SJSU Research Foundation vendors. ACH is our preferred form of payment as it supports "Go Green" initiatives. With ACH, payments will be electronically deposited into your company's designated bank account through the Automated Clearing House within 24-48 hours of being released.

	ocial Security No:	
Street Address:		
City, State, Zip		
Telephone:		
Fax Number:		
Email Address:		
Contact Name:		
Financial Institutio Bank Name:	n Information	
Branch Name:		
Account Type:		
Account Name:		
Account Number		
Routing Number		
	rch Foundation Account ull force until Vendor pr	nd correct, and that I, as a representative for the above named company, hereby ts Payable to electronically deposit payments to the designated bank account. This rovides written notice of change or cancellation delivered to SJSU Research Foundat reet, 4th Floor, San Jose, CA 95112.
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ccounts Payable Dep	on unem, 210 N. 401 Str	
ccounts Payable Dep Printed Name:	orument, 210 N. 4til Str	
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Please send the completed & signed form along with a voided check or provide your banking details on company or bank letterhead (no void check needed) to: 210 N. 4th Street, 4th Floor, San Jose, CA 95112 Attn: Accounts Payable or Email to: research-foundation-ap@sjsu.edu