University of Nevada, Reno
Statewide • Worldwide

Controller's Office
Mail Stop 0124
Ross Hall, Room 103
Reno, Nevada 89557-1124
(775) 784-4168
Fax: (775) 784-6229

Direct Deposit Request and Authorization

Vendor and employee reimbursement, other than payroll (Travel Claims/Advances, A/P, Petty Cash, etc.) may now be electronically reimbursed directly to your financial institution. To initiate this process, please complete the requested information below. If you are unsure of your ABA and account number, attach a voided check to ensure proper crediting of your account. This authorization form must be returned to the address or fax shown above.

This is an authorization to (check one) **:** ☐ Start ☐ Change ☐ Cancel

the direct deposit of any payments due me from UNR to my account with the financial institution described below:

☐ UNR Employee/Student ☐ Vendor

Name: _____ Vendor Name: _____
(as listed with UNR)

Employee/Student ID : _____ Vendor ID Number: _____
(if available)

Contact Name: _____ Contact Phone: _____

E-mail Address: _____ E-mail Address: _____

Bank Account Type: ☐ Checking ☐ Savings

Name: _____
(Name as it appears on bank account)

Name of Bank: _____

Bank Address: _____

Bank (ABA) Number: _____

Bank Account Number: _____

I hereby authorize the University of Nevada, Reno to transfer the full amount of my payment(s) and if necessary, initiate debit entries and adjustments for any credit entries made in error. This authorization will remain in effect until canceled in writing. A new authorization must be completed if I change my account, close my account, or change financial institutions.

Date: _____

_____
Authorized signature for bank account

_____
Printed name

PLEASE ATTACH A VOIDED CHECK TO THIS AUTHORIZATION
(if not completing the ABA # and Acct. # above)

For Internal Use Only:

Date Input ___/___/_____ **Initials** ____

Check One
☐ **Checking**
☐ **Savings**