Southern Methodist University
Direct Deposit Authorization (Accounts Payable)

Terms and Conditions

I hereby authorize SMU to initiate accounts payable transactions by electronic transfer to my account (specified below) for **ALL** reimbursements and other payments to me generated by the SMU Accounts Payable Department. These transactions include travel advances, reimbursement for travel and entertainment expense, and other miscellaneous payments generated by the SMU Accounts Payable department.

If amounts to which I am not entitled are deposited into my account, I authorize SMU to direct my Financial Institution to return them. In the event my designated account is closed or contains an insufficient balance to allow a deduction for amounts deposited in error, I agree that I will either reimburse the University the amount paid to me in error immediately upon notification, or SMU may withhold any amounts owing to me until such amount is repaid This authority is to remain in full force and effect until I revoke it by giving 10 days prior written notice.

Accounts Payable deposits can be made to only one depository account.

Account Type (Select One)	☐ **Checking (attach voided check)**	☐ **Savings (attach deposit slip)**
Name (Last)	**(First)**	**EMPL ID**
Department Name	**Campus Phone**	**Campus e-mail**

Signature:_____Date:_____

CANCELLATION ☐

I hereby cancel the authorization for deposit of my funds by electronic transfer.

Please return this completed form to the Accounts Payable Department, Perkins Administration Building Room 306, Campus P.O. Box 750162

To be completed by Accounts Payable

Name of Financial Institution:	Transit/ABA Number:	Account Number:
Entered By:	Date Entered:	