

REQUEST FOR ELECTRONIC PAYMENT

If this form is not electronically completed, please print legibly.

Vendor Payee N	lame	
Vendor Comple Address (as sho		
Email Address Remittance Ad		
Bank Name	Enter banking	g details in the applicable fields - US Banks are paid ACH only.
Complete Bank Address		
Account Holder As shown on you	r Name ur banking record	
Account Number	er	
ACH Routing #	US Banks	US Banks have different routing numbers for ACH & Wire payments. Deloitte pays via ACH for US Banks, please provide the correct routing number.
IBAN #	Non-US Banks	
Sort Code	Non-US Banks	
Swift Code	Non-US Banks	
Intermediary Banking use only		
Bank Name		
Account Number		
Routing Number	er or Swift Code	
In addition to t	he Request for Electronic Payment Form, Deloitte requi	res one of the following to be submitted:
 A letter from your bank, on bank letterhead, with ACH instructions for US vendors or DMT instructions for non-US vendors. Banking details pre-printed on your company's invoice as a part of the invoice. 		
Deloitte considers banking information Personally Identifiable Information (PII) and is handled with strict confidentiality.		
Inaccuracies in the information provided could cause your payment to be rejected by the bank and we are not liable to pay any late fees. By the execution		
of this form, yo	u authorize Deloitte to make your payments electronic	ally.
Review all information before digitally signing this form, as it will lock for security purposes and changes cannot be made afterwards.		
Phone Number		Additional Phone Number
Note	that a Vendor Analyst will call to verify banking, please	provide two phone numbers that can be reached during business hours.
Print Signature		Title
Signature		Date
	If not able to sign digitally certified, print and manually	sign this form.
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