## DEAR VENDORS:

IF YOU CURRENTLY ARE RECEIVING PAPERC MOOK, BUT WO ELECTRONICALLWIA DIRECT DEPOSIT ALONG WITH THE MAIL NOTIFICATION, THE FOLLOWINGINFORMATION IN THESPACES PROVIDED BELOW.		
Payee Name:		
	Supplier Number (Banner + or Vend	dor Code):
Bank Name:		
9-Digit Routing Number:		
Account Number:	Check	ring Savings
Change to current direct deposit inform	nation: Yes No	
Last four digits of the former bank a	ccount number:	
Taxpayer ID:		
Email Addr essfor Payment Deta ils: Phone Number:		Phone Number:
thoriz ed Signa ture:Printed Name:		me:
Feel free to cont act our office at (5	13)529-9200 if you have any ques tions	i.
Sinc ere ly,		
Accounts Payable		
Mail Form To:	Fax Form To:	E-mail Form To:
Accounts Pay abl e	Accounts Payable	Account spayable@MiamiOH.edu
501 E. High St.	(513)529-6124	
107 Roude bu sh Hall		
Oxfo rd OH, 45056		

