

COMMONWEALTH OF PENNSYLVANIA ELECTRONIC ADDENDA USER ACCEPTANCE AGREEMENT

Electronic addenda provides electronic documentation of payments from the Commonwealth of Pennsylvania (Commonwealth) to a vendor's financial institution when the ACH payments are deposited in the vendor's bank account. Electronic addenda replace paper remittance advice.

General Instructions: Please type or print clearly. See Page 2 for specific instructions. Submit the completed Agreement to the Commonwealth Vendor Data Management Unit:

- E-mail: ra-psc_supplier_requests@state.pa.us
- Fax: 717.214.0140
- Mail: Commonwealth of PA, Vendor Data Management Unit, 555 Walnut Street, 9th Floor Forum Place, Harrisburg, PA 17101

Please direct questions regarding the Agreement to the Payable Services Call Center at 717.346.2676 (menu option #1) or toll free 1.877.435.7363 (menu option #1).

VENDOR INFORMATION (PLEASE TYPE OR PRINT):

VENDOR NAME	FEDERAL TAXPAYER ID NUMBER	SAP VENDOR NUMBER
STREET ADDRESS OR PO BOX	CITY	STATE
BANK ROUTING NUMBER	ELECTRONIC ADDENDA FORMAT: <input type="radio"/> CTX (PREFERRED)	
	(CHOOSE ONE ONLY) <input type="radio"/> CCD+	
BANKING INSTITUTION NAME	BANK CONTACT NAME	BANK CONTACT TELEPHONE NUMBER

By completing and returning this agreement, the vendor accepts all of the following terms and conditions:

- The vendor waives receipt of paper remittance advice for all payments made via electronic addenda.
- The vendor and the banking institution must accept the standard EA reporting format in order to enroll.
Example: **705RMR*IV*XXXXXXXXXXXXXXXXXX**\$0.00\ENT*1** ("X" represents the 16-digit invoice number or other type of identification number)
- The vendor must have already established an Automated Clearing House (ACH) bank account on the vendor record.
- The vendor understands that only one bank account can be designated to receive electronic addenda.
- The vendor is responsible for any fees associated with electronic addenda that may be charged by its financial institution.
- The vendor is responsible for reviewing and applying the electronic addenda received by its banking institution.

APPROVAL - Only an authorized company official may approve this agreement on behalf of the vendor.

APPROVER NAME (PLEASE PRINT OR TYPE)	APPROVER TITLE
APPROVER EMAIL ADDRESS	APPROVER PHONE NUMBER
APPROVER SIGNATURE	DATE

**INSTRUCTIONS FOR COMPLETING THE COMMONWEALTH OF PENNSYLVANIA
ELECTRONIC ADDENDA USER ACCEPTANCE AGREEMENT**

The Commonwealth of Pennsylvania (Commonwealth) electronic addenda program provides electronic documentation of payments from the Commonwealth to a vendor's financial institution when the ACH payments are deposited in the vendor's bank account. Electronic addenda replace paper remittance advice. Any vendor seeking to participate in the Commonwealth electronic addenda program must complete the Electronic Addenda User Acceptance Agreement (Agreement).

Vendor Information	Instructions
Vendor Name	Enter the complete name of the entity.
Federal Taxpayer ID Number	Enter the nine-digit federal taxpayer identification number (TIN). The TIN is either an individual's social security number or an employer identification number.
SAP Vendor Number	Enter the Commonwealth of Pennsylvania assigned vendor number. (If known)
Street Address/PO Box	Enter the street address or post office box to which payments would go if mailed.
City, State, and Postal Code	Enter the city, state, and postal code of the address to which payments would go if mailed.
Bank Routing Number	Enter the nine-digit bank routing number.
Bank Account Number	The account number is the company or individual's bank account number into which funds will be transferred.
Electronic Addenda Format	Select the electronic addenda format to be used. CTX is the preferred method.
Banking Institution Name	Enter the financial institution's name.
Bank Contact Name	Enter the name of the financial institution's ACH coordinator.
Bank Contact Phone	Enter the ACH coordinator's phone number including area code.

Approval Information	Instructions
Approver Name	Approver's name printed or typed.
Approver Title	Approver's title printed or typed.
Approver Email Address	Approver's email address printed or typed.
Approver Phone Number	Approver's contact phone number including area code.
Approver Signature	Approver's signature. The signature denotes acceptance of all terms and approval of form.
Date	Date of signature.

PRIVACY ACT STATEMENT

The preceding information is provided to comply with the Privacy Act of 1974. The information collected on this form will be used by the Treasury Department to transmit payment data by electronic means to a financial institution. Failure to provide requested information may delay or prevent receipt of payment through the Automated Clearing House (ACH) payment system.