



City of Lancaster, Texas

Application for ACH Payments to Vendors



PO Box 940 * Lancaster, TX 75146 * 972.218.1320* 972.218.3619 FAX
cwomble@lancaster-tx.com; accounts-payable@lancaster-tx.com

Please complete the information below and all future invoices will be paid via ACH. A confirmation email will be sent to the email address listed below. [Please return this form to both of the email addresses listed above.](#)

Company Name: _____

Payment Address: _____

Payment Address: _____

City: _____

State: _____

Zip Code: _____

A/R Phone: _____

A/R Contact: _____

Confirmation Email _____

Routing # (9 digits)* _____

Account #(*) _____

Account Type: Checking _____ Savings _____

*or attach a voided check

We hereby authorize the City of Lancaster, Texas to electronically credit our bank account for payment of outstanding invoices due from the City of Lancaster. We will notify the City in writing if we change banks, bank account number, or if we wish to cancel.

Authorized Signature

Date

Printed Name

Title