

**REQUEST REMITTANCE TO UofL VIA EFT
(FOR INTERNAL UNIVERSITY USE ONLY)**

This form is used to request University bank account information be provided to a Payor who wants to remit payment to the University via EFT or to provide Treasury with information about an expected receipt. Please return completed form to TREASMGT@louisville.edu.

New Authorization **Update Existing Authorization** **Cancel Authorization**
(Select one by entering X)

Uof L Department Name:

Contact: **Phone:**
Fax: **Email:**

PAYOR INFORMATION

Payor Name :

Street:

City: **State:** **Zip Code:**

If International, Country: **Postal Code:**

Amount, if known: **Frequency of Payment:**
(If Single Payment, enter One Time)

Estimated Date of Payment: *(If day is not known, enter month/year)*

PeopleSoft Speed Type and Account Code for Posting Payment

SPEEDTYPE	ACCOUNT CODE	AMOUNT

Note: Our University Accounting department will post the receipt to the SpeedType/Accounts specified above. If there is a need to reallocate to additional SpeedType and/or Accounts please contact University Accounting.

Additional Comments: