Print Form

Dana A. Friend
Acting Fiscal Officer

DISTRICT OF COLUMBIA COURTS
Budget and Finance Division
Office: Gallery Place
616 H Street, N.W., Suite 600.19
Washington, D.C. 20001

Wallace S. Lewis, III
Defender Services Branch Chief

ACH VENDOR/MISCELLANEOUS PAYMENT ENROLLMENT FORM

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Receipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion.

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System

AGENCY INFORMATION

FEDERAL PROGRAM AGENCY:
DISTRICT OF COLUMBIA COURTS

ACH FORMAT:
☒ CCD+ ☐ CTX ☐ CTP

AGENCY IDENTIFIER: **GSA**

AGENCY LOCATION CODE (ALC):
47-00-0016

ADDRESS: **616 H STREET, NW**
SUITE 600
WASHINGTON, DC 20001

CONTACT PERSON NAME: **VICKY JETER**

TELEPHONE NUMBER: **(202) 879-2866**

ADDITIONAL INFORMATION: **FAX: (202) 879-2894**

PAYEE / COMPANY INFORMATION

NAME:

SSN or TAXPAYER ID:

ADDRESS:

TELEPHONE:

CONTACT PERSON (if different from above):

FINANCIAL INSTITUTION INFORMATION

NAME:

TELEPHONE NUMBER:

ATTACH COPY OF VOIDED CHECK HERE

ACH COORDINATOR NAME:

NINE-DIGIT ROUTING TRANSIT NUMBER