



# Broward County Public Schools

PROCUREMENT & WAREHOUSING SERVICES DEPARTMENT

## DIRECT DEPOSIT FOR MILEAGE AND TRAVEL REIMBURSEMENT

**NEW VENDOR**
 **UPDATE EXISTING INFORMATION**
**VENDOR #:** \_\_\_\_\_

**Employee Address/Phone/Etc.**

*Important: Enter Employee name exactly as it appears on Employee Records*

**Employee Name:** \_\_\_\_\_

**Street/House Number:** \_\_\_\_\_

**City/ State:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Mobile Telephone:** \_\_\_\_\_

**E-mail Address (for confirmation):** \_\_\_\_\_

**Accounting Information**

(THIS FIELD IS REQUIRED)

**PERSONNEL NUMBER:** \_\_\_\_\_

**\*\*\*\*\* A VOIDED CHECK MUST BE SUBMITTED WITH THIS FORM \*\*\*\*\***  
**(VOIDED CHECKS CAN BE SCANNED AND SENT BY EMAIL)**

The undersigned certifies that the information provided is current and complete:

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Please cancel my Direct Deposit set up, I now prefer to receive checks.**

**FOR USE BY PROCUREMENT & WAREHOUSING SERVICES ONLY**

**ACCOUNT TYPE:**

**ZEMP**

**VT8- Employee ACH**

**PAYMENT METHOD: T: ACH**

**DSG CLERK:** \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_