EFT Instructions

This is the process for employees who would like to be reimbursed by direct deposit/electronic funds transfer (EFT) for employee travel payments (advances and claims) and/or reimbursements. (For Payroll direct deposit questions, please contact Human Resources.)

How to sign up for EFT

1. Complete the attached EFT form that follows these instructions. These instructions & the form are accessible in both the Accounts Payable & Travel folders at http://www.csub.edu/bas/fiscal/studaccount/Student%20Financial%20Services%20and%20Accounting%20Operations%20Forms/index.html

2. Attach a voided check (checking) or deposit slip (savings), or confirm the routing number and account number with your banking institution.

3. Submit all paperwork (in a sealed envelope) in person to:
   General Accounting (Administration Building)
   Attn: Becky Lappin
   (Do not put in interoffice mail.)

Once you are signed up

Once you have signed up for EFT and have submitted your first travel claim, travel advance or other employee reimbursement request, watch for the email notification that the payment has been sent to your bank. You may have to look in your “Junk E-mail” folder. If the email was in your “Junk E-email”, right click on the email and select “Junk” from the drop down list and then “Never Block Sender”.

EFT - Direct Deposit Employee Authorization
Form for Travel or AP Reimbursements

This form may NOT be used to request Payroll direct deposit.

Name ___________________________  Employee ID# ___________________________

Account Type (check one)
☐ Checking
☐ Savings

Bank Name ___________________________  Branch address ___________________________
Bank Routing Number ___________________________
Account Number ___________________________

**IMPORTANT** Please attach a voided check or deposit slip, or confirm the routing number and account number with your banking institution. (Your debit card number is not your bank account number.)

I hereby authorize in accordance with the rules and regulations of the National Automated Clearinghouse Association ("NACHA") California State University, Bakersfield (CSUB) to credit any reimbursement due to me via automated clearinghouse electronic fund transfer ("ACH") to the bank and bank account owned by me referenced above. Further, I hereby authorize CSUB to withdraw funds from the above referenced bank account owned by me via ACH debit. Such debits are authorized only to perform legitimate and appropriate financial transactions between me and CSUB including, but not limited to, retrieval of reimbursement overpayments. This authorization will remain in effect until cancelled in writing. A new authorization must be completed if I change my bank account, close my bank account, or change financial institutions.

Note: I understand that CSUB requires ten (10) business days to set up this initial authorization and two (2) business days for funds to become available following an EFT electronic funds transfer.

I understand that, per CSUB travel policy and procedures, a travel advance is due and payable within 30 days after a trip is completed. If my completed travel expense claim shows that I did not use the entire advance requested, I am still responsible for the entire advance amount. I will repay any outstanding advance balance to the Cashier’s office in Administration East, and attach the receipt to my travel expense claim when submitting to the Payment Services Office in Administration East for processing. My acceptance of a travel advance payment authorizes collection activities. Failure to comply with this policy will result in collection activities that may include internal and external collection efforts, deduction from future travel expense claims, and/or tax refund offset.

Signature: ___________________________  Date: ___________________________
Phone: ___________________________  Email Address: ___________________________
(CSUB email only)

Privacy Notification
The State of California Information Practices of 1977 (effective July 1, 1978) requires the University to provide the following information to individuals who are asked to supply information about themselves. The principle purpose for requesting information on the form is to acquire authorization for reimbursement distribution to a financial institution of the individual’s choosing. Furnishing all information on this form is mandatory. Failure to provide such information may delay or even prevent completion of the action for which the form is being submitted.

Contact Becky Lappin with questions: blappin@csub.edu, ext 2531.

Vendor # ___________________________  Entered By: ___________________________  Date Entered: ___________________________