

**EFT – ACH VENDOR/MISCELLANEOUS PAYMENT  
ENROLLMENT FORM**



For suppliers with US banking, please complete this form and email to [suppliers@corix.com](mailto:suppliers@corix.com)

**PAYEE/COMPANY INFORMATION**

Do you supply to Canada and/or US?

Canada

US

<b>Company Name</b>	
<b>Address</b>	
<b>Telephone No.</b>	<b>Fax No.</b>
<b>Contact Person Name</b>	
<b>Remit Advice Email Address</b>	

<b>FEIN Number</b>	<b>Payment Terms</b>
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<b>Remit Advice Address</b>
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**BANK INFORMATION**

<b>Bank Name</b>
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<b>Bank Country</b>
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<b>Nine-Digit Routing Transit Number</b> (Must be 9 digits – please include leading '0')
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<b>Account No.</b>
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<b>Account Name</b> (Optional)
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<b>Type of Account</b> (Savings or Checking)
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