

# Wire/ACH Payment Request



MBI use only:	
GL/account	_____
Trans Amt	_____

Transaction Date: \_\_\_\_\_

## Vendor Information

Vendor Name: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* \_\_\_\_\_ *Apartment/Unit #* \_\_\_\_\_

\_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP Code* \_\_\_\_\_

Taxpayer ID # \_\_\_\_\_ or \_\_\_\_\_  
*Employer identification number* \_\_\_\_\_ *Social Security number* \_\_\_\_\_

Contact person: \_\_\_\_\_  
*Last* \_\_\_\_\_ *First* \_\_\_\_\_ *M.I.* \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## Bank Information

Bank Name: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* \_\_\_\_\_

\_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP Code* \_\_\_\_\_ Phone: \_\_\_\_\_

ABA # \_\_\_\_\_ Swift Code \_\_\_\_\_ Account # \_\_\_\_\_

## Authorization

*I hereby authorize Moody Bible Institute to initiate credit entries to my account above and the participating institution named above to credit the same to such account.*

*This authorization is to remain in full force and effect until MBI has received written notification from me of its termination in such time and in such manner as to afford MBI a reasonable opportunity to act on it.*

Requestor: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Send completed form to:  
Moody Bible Institute, Accounts Payable Department, 820 N LaSalle Boulevard, Chicago, IL 60610  
Inquiries to: Roger Sipes, Phone: 312-329-2226, Email: [rsipes@moody.edu](mailto:rsipes@moody.edu)

MBI Use Only:	<b>Authorize ACH Payment</b>
	_____ <i>Signature</i>
	_____ <i>Signature (Excess \$5,000.00)</i>