Montgomery College Authorization for Domestic Bank ACH Transaction

| ACH Value Date | |
|--|------|
| Transfer FROM account number: PNC No. 8026248529 | |
| Transfer TO account number: | |
| Amount of Transfer: | |
| Beneficiary Bank: | |
| Beneficiary Bank ABA Routing Number: | |
| Beneficiary Bank Address: | |
| Beneficiary Bank Account Number: | |
| Beneficiary Name: | |
| Special Instructions: | |
| Purpose of Transfer: | |
| Budget Account Number: | |
| Requestor/Budget Approver Signature | Date |
| | |
| | |
| Please provide support documents for the payment - invoice, contract, | |
| Submit the completed Domestic Bank ACH request form to Accounts Payable, CT 310. | |
| | |
| For OBS Office Use Only: | |
| Initiated by | Date |
| | |
| | |
| | |
| ACH Confirmation Number: Approved by | Date |