

**U.S. DEPARTMENT OF ENERGY
WESTEREN AREA POWER ADMINISTRATION
ACH PAYMENT ENROLLMENT FORM**

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion.

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provision of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

AGENCY INFORMATION

FEDERAL PROGRAM AGENCY: Western Area Power Administration		
AGENCY IDENTIFIER: WAPA	AGENCY LOCATION CODE: (ALC) 89001602	ACH FORMAT: CCD+
ADDRESS: P. O. Box 281213 Lakewood, CO 80228-8213		
CONTACT: Fiscal Accounting, A8210		TELEPHONE NUMBER: (720) 962-7477
VENDOR NO.:	ADDITIONAL INFORMATION:	FACSIMILE NUMBER: (720) 962-7459

PAYEE/COMPANY INFORMATION

NAME:	FED TAXPAYER ID OR SSN NO.: (9 DIGITS)
ADDRESS:	
CONTACT PERSON: (NAME, TITLE, AND SIGNATURE)	
TELEPHONE NUMBER: ()	

FINANCIAL INSTITUTION INFORMATION

NAME:	
ADDRESS:	
ACH COORDINATOR NAME:	TELEPHONE NUMBER: ()
NINE-DIGIT ROUTING TRANSIT NUMBER: (ABA) _____	
DEPOSITOR ACCOUNT TITLE:	
DEPOSITOR ACCOUNT NUMBER:	
TYPE OF ACCOUNT: <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	
SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL: (Could be the same as ACH Coordinator)	TELEPHONE NUMBER: ()

AGENCY COPY

PAYEE COMPANY COPY

FINANCIAL INSTITUTION COPY

Instructions for Completing WAPA 220056

- 1. Agency Information Section -- Federal agency prints or types the name and address of the Federal program agency originating the vendor/miscellaneous payment, agency identifier, agency location code, contact person name and telephone number of the agency.**
- 2. Payee/Company Information Section -- Payee prints or types the name of the payee/company and address that will receive ACH vendor/miscellaneous payments, social security or taxpayer ID number, and contact person name and telephone number of the payee/company. Payee also verifies depositor account number, account title, and type of account entered by your financial institution in the Financial Institution Information Section.**
- 3. Financial Institution Information Section -- Financial institution prints or types the name and address of the payee/company's financial institution who will receive the ACH payment, ACH coordinator name and telephone number, nine-digit routing transit number, depositor (payee/company) account title, and account number. Also, the box for type of account is checked, and the signature, title, and telephone number of the appropriate financial institution official are included.**