

# YMCA of Middle Tennessee

## Employee Authorization for EFT Expense Reimbursement

I authorize the YMCA of Middle Tennessee to deposit my reimbursable expenses into the account listed below via electronic funds transfer (EFT). I understand that it is my responsibility to keep a valid account on file in order to receive timely reimbursements. I also authorize the YMCA to make withdrawals from this account in the event that a credit entry is made in error.

I agree not to hold the YMCA responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until the YMCA receives a written notice of cancellation from me or my financial institution, or until I submit a new EFT Authorization Form to Accounts Payable.

**NAME:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_  
*(to receive payment notifications)*

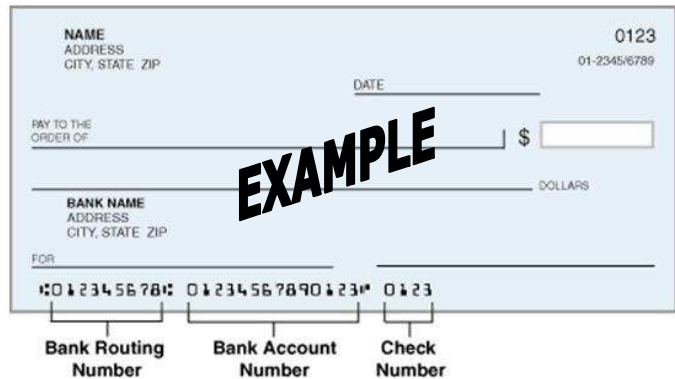
**BANK NAME:** \_\_\_\_\_  **CHECKING**  **SAVINGS**

**ROUTING NUMBER:** \_\_\_\_\_

**ACCOUNT NUMBER:** \_\_\_\_\_

*Attach copy (or voided original) of check or savings account slip in order to ensure accurate account number entry and timely reimbursement. In the event of an error in your account, your reimbursement may be delayed.*

*The YMCA is not responsible for delays resulting from failure on your part to update your account information.*



**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Please contact Mitzi Frey at [mfrey@ymcamidtn.org](mailto:mfrey@ymcamidtn.org) if you have any questions regarding your EFT form.