



FLORESVILLE ELECTRIC LIGHT & POWER SYSTEM

Finance – Accounts Payable Department
P O Box 218, Floresville, Texas 78114
Phone (830) 216-7000 Fax (830)393-0362
Email: Finance-AP@felps.us

ACH AUTHORIZATION FORM

Vendor Information

Vendor Name	Email		
Address	City	State	Zip
Accounting/ACH Contact Name	Phone	Fax	

I certify that the information I provided is correct and that I am an authorized signer or designate of the account provided for the direct deposit transactions and am entitled to provide this authorization. I (we) further authorize Floresville Electric Light & Power System to initiate credit entries to the account and financial institution listed above. I (we) further authorize adjusting entries (reversals) to correct errors, if any. This authorization is to remain in effect until FELPS has received written notification of termination in such time and manner as to afford FELPS and the depository financial institution a reasonable opportunity to act on it.

- Checking New Setup
 Savings Cancel
 Change

Banking Information

Name on Bank Account	
Bank Name and Routing Number*	Bank Account #

*Please provide the 9 digit bank routing number from a check. The routing number from a deposit slip is invalid.

If you change banks or accounts please provide at least ten (10) days written notice.

Vendor Authorization:

Authorized Name/Title

Authorized Signature

Date

P.O. BOX 218 | 1400 4TH ST.

FLORESVILLE, TX 78114

www.felps.us

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