

Dear Vendor/ISI Service Provider:

Intercollegiate Studies Institute Inc. makes all payments via the Electronic Funds Transfer system to your bank and directly into the account of your choice.

Please provide the following information so that we may transmit your payments:

- 1) Bank Name,
- 2) Bank Account Number,
- 3) Bank Routing Number, and
- 4) Type of account (checking or savings).

Below is a sample check detailing where to find the information to complete the enclosed form.

Please complete the attached form and return it to the attention of the accounting department. If you wish to fax the information, our fax number is 302-652-1760. Please contact your financial institution to determine its policy on notification of deposits.

If you have any questions, please do not hesitate to contact Cindie Struyk at 302-652-4600, ext 152. Thank you for your cooperation.

Sincerely,

Elaine Pinder
Chief Financial Officer

Sample Check

CURT MAPLE
ANNE MAPLE
123 Pear Lane
Anyplace, VA 20000

PAY TO THE ORDER OF _____ \$ _____

ANYPLACE BANK
Anyplace, VA 20000

For _____

1: (250250025) : (20202086) • 1234

1234
15-00000000

DOLLARS

Do not include the check number.

SAMPLE

Note. The routing and account numbers may be in different places on your check.

ELECTRONIC FUNDS TRANSFER INFORMATION

Please provide the Intercollegiate Studies Institute Inc. with the information listed below. Please print all information. When completed, fax to Cindie Struyk's attention at 302-652-1760 or email to cstruyk@isi.org

General Information:

Payee Name: _____

Mailing Address: _____

Federal Tax ID Number: _____

Type of Business: Corporation Partnership Other _____

Bank Information:

Bank Name: _____

Bank Branch: _____

Bank Address: _____

Bank Routing Number: _____

Bank Account Number: _____

Type of Account: Checking Savings

Contact Information:

Phone #: _____ Email Address: _____

Email address is required in order to receive notification when funds are transferred.

Signature: _____ Date: _____