

The following information is required when setting up a supplier's bank.

For each box  selected, please list the corresponding number.

Enter the following supplier information						
Supplier Legal Entity name:						
Legal Address line 1:						
Legal Address Line 2:						
City :		Postal Code:		US State:		
Province: - Country (Nation):		USA				
VAT <input type="checkbox"/>		TAX ID <input type="checkbox"/>				
Trade Style or Doing Business as Name						
Enter the following information related to the supplier's bank						
Bank Name		Bank Number				
Bank Physical Address line 1						
Bank Physical Address Line 2						
City	New York	Postal Code:		US State	New York	
Province - Country (Nation)						
Enter the following information related to the supplier's bank account						
Name on Bank Account:			Account Currency		USD	
IBAN <input type="checkbox"/>				Bank Account <input checked="" type="checkbox"/>		
(9 digit) ACH ABA Clearing Code/ Routing No		SWIFT/ BIC Code		Sort/ BLZ Code		
Enter the following information about the intermediary bank, if applicable						
Intermediary Bank Name:						
Bank Physical Address line 1:						
Bank Physical Address Line 2:						
City :		Postal Code:		US State:		
Province: - Country (Nation):						
Routing No <input type="checkbox"/>				SWIFT Code <input type="checkbox"/>		
Enter information about who completed this form						
Printed Name						
Signed Name			Date signed			
Email			Phone			
Additional Comments						