

Supplier Authorization for Automated Electronic Deposit of Invoice Payments

P-306 01/2024

	☐ without invoice line item detail (CCD) ☐ with invoice line item detail (CTX: Non l	EDI) ×
* Your bank must be able to read and deliver a <u>fre</u> check with your financial institution before selecting		record. Please
Please do NOT send in this form until the purchas need updated.	se order is signed. If updating your banking	g, fill in all fields that
Section I: Supplier Information		
Accounts Receivable Payment Site Information*		
Full Company Name		
Accounts Receivable Address		
Accounts Receivable Contact	·····	
Phone Number		
E-Mail Address/Fax Number		
Section II: Banking Information Depository (Bank) Name		
Depository (Bank) Address		
Bank Contact Name		
Bank Contact Phone Number		
ACH (EFT) Information ONLY. DO NOT Provide	Wire Information.	
Deposit Account Title		
Bank Routing/Transit or ABA Number (9 digits)		
Deposit Account Number		
Type of Account	Checking Savings	
I hereby authorize Fluor Marine Propulsion, LLC (FMP) payment of invoices due to the Supplier indicated. In the refund to FMP either by their company check or by a ret that this authorization will remain in full force and effect requesting a change or cancellation and has had reason a change are bank to bank notifications or updated P-30 Accounts Payable.	e event of an overpayment, the Supplier agrees urn ACH transfer initiated through their bank. I until FMP Accounts Payable has received writte nable opportunity to act on it. Acceptable methe	s to issue a understand en notification ods to request
Authorized Agent Name Title	Signature	 Date

Instructions for Completing P-306

Preferred Remittance Transmission Section (Completed by Supplier)

- A. Without invoice line item detail (CCD) is when a supplier would like a remittance advice emailed. Note, email is required in Section I.
- B. Without invoice line item detail (CTX: Non EDI) is when a supplier is able to receive an electronic message along with the ACH payment. This message is transmitted from FMP's bank to the supplier's bank. Please verify with your bank to verify supplier bank account can receive Non EDI format addenda '7' record.

Section I (Completed by Supplier)

- A. Name should be the same name as the supplier name on PO
- B. Address for Accounts Receivable (AR)
- C. AR Contact Name
- D. AR Contact Phone
- E. AR Contact Email, this is the email we utilize for remittance advices when CCD is indicated.

Section II (Completed by Supplier)

- A. Bank Name
- B. Bank Address
- C. Bank Contact Name
- D. Bank Contact Phone
- E. ACH Only, no wire information allowed
- F. Bank Account Name
- G. Routing Number (9 Digits)
- H. Account Number
- I. Type of Account

Form must be signed by an authorized agent.

Completed forms should be returned to the FMP Contracts Professional