

RICHARD L. BENBOW
GENERAL MANAGER

CITY OF LOS ANGELES
CALIFORNIA



ANTONIO R. VILLARAIGOSA
MAYOR

COMMUNITY DEVELOPMENT
DEPARTMENT

1200 WEST 7TH STREET
LOS ANGELES, CA 90017

DATE: October 14, 2011
TO: All CDD Contractors
FROM: *Catherine Bondoc*
Catherine Bondoc, Director
Financial Management Division
SUBJECT: **FMD INFORMATION BULLETIN 12-01
EFT PAYMENT TO CONTRACTORS**

The City of Los Angeles recently implemented its new Financial Management System (FMS), which boasts a number of enhanced features, including the ability to pay City contractors via an electronic fund transfer (EFT). We encourage you to take advantage of this feature as it offers a more efficient and secure payment process. However, please note the following:

- Payments for multiple invoices from different City departments may be consolidated into one payment. The Controller will mail a remittance advice to you that will have all the details of the payment.
- The City requires minimum three (3) days lead-time. This means that funds will be electronically transferred, at least three days from the day the invoice is approved for payment by CDD and Controller.

If you are interested in enrolling, please complete the attached vendor set up request form for automated clearing house (ACH) and send to:

Community Development Department
Financial Management Division
Attn: George Chacko
1200 West 7th Street, 4th Floor
Los Angeles, CA 90017

Please enclose a voided check for checking accounts or a pre-printed deposit slip for savings accounts. A representative authorized to sign the contract with CDD must sign the form or your request will be rejected.



We will notify you if your application is approved/rejected by the Office of Finance and Controller's Office.

Additionally, in order to ensure that payments are not delayed, please verify that the legal business name on your City of Los Angeles Business Tax Registration Certificate (BTRC) exactly matches the following:

- Business name registered with the Secretary of State. Check your business name at <http://kepler.sos.ca.gov/cbs.aspx> ; and
- Business name on contracts with CDD.

A common discrepancy is the use of "C" to represent "INC". For example, if the legal name on your CDD contract is ABC Community Services, Inc. but the name on the BTRC states ABC Community Services, \C, FMS will reject the transaction and your payment will be delayed.

If you need to correct any discrepancies, please visit the City of Los Angeles Office of Finance's website at www.lacity.org/finance for their service locations.

If you have any questions, please contact George Chacko at (213) 744-7310 or email him at George.Chacko@lacity.org.

Attachment
CB:MDL:GC

CITY OF LOS ANGELES

VENDOR SET UP REQUEST FORM FOR AUTOMATED CLEARING HOUSE (ACH)

INSTRUCTIONS:

This form is to request electronic payment via Automated Clearing House (ACH) from the City of Los Angeles. ACH offers several advantages over regular paper checks. They are more secure (directly deposited into your bank account), quicker to receive, and saves you time by not having to deposit checks and wait for them to clear. Vendors that sign up for ACH will continue to receive remittance advice by mail.

To request for ACH, please complete the form below, gather the required documentation, and submit to the Accounts Payable Section of the **primary City Department** that you do business with (e.g. Department of Transportation, PW Bureau of Engineering, General Services, etc.)

VENDOR IDENTIFICATION:

Vendor Name _____

Alias/DBA Name _____

Address _____

City _____ State _____ Zip _____

Contact Name _____ Telephone Number _____

City of Los Angeles Vendor Number (if known) _____

TIN/EIN/SSN _____

City Business Tax Registration Certificate (BTRC) Number* _____

**BTRC number is obtained through Office of Finance for persons or entities that engage in business within the City of Los Angeles. For any questions about your BTRC number or if you need a BTRC, please call the Office of Finance at 213-473-5901.*

BANK ACCOUNT INFORMATION:

Bank Account No _____ Type (Checking or Savings) _____

ABA (Routing) No. _____
(Must have 9-digits)

Bank Address _____

City _____ State _____ Zip _____

REQUIRED DOCUMENTATION:

To enroll for ACH payments, please complete this form and include the following required documentation:

- Deposits to a checking account must include a blank check with the work "VOID" written across it.
- Deposits to a savings account must include a pre-printed deposit slip for the account

CERTIFICATION:

I certify that the information provided herein is true, correct, and complete.

AUTHORIZED SIGNATURE _____ DATE SIGNED _____

Note: Must be authorized Principal signature

PRINT NAME _____ Telephone Number _____
