

County of Riverside ACH Authorized Signature Form



I declare, under penalty of perjury under the laws of the State of California, that the information entered belongs to the supplier per the supplier registration therefore subsequently the supplier profile and I am authorized to enroll the supplier in the County of Riverside's ACH process.

Supplier Name:		
Supplier		
Number:		
I have provided a void	ded check and or a Bank Letter	
I have provided a business card or other proof showing my affiliation with the supplier.		
Authorized Enrollee Signature:	Date:	
	Refer to page 2 for a listing of authorized enrollee s	signers.
Print Name & Title: Upload a su	pporting document, establishing your affiliation with the supplier per pag this form.	e 2 of this form, along with
Email questions to ACOSupplierRegistration@rivco.org or contact us at (951) 955-3841		
	FOR INTERNAL USE ONLY	
Date Received:		
Reviewed By:		Date:
Accounts Payable Manger Appro	val:	Date:
The state of the s		Date:
ersion 1- 04/2023		

- (A) Individual/Sole Proprietor or Single Member LLC The owner of the business must sign the form.
- **(B) Corporation** If the business is a corporation (including Non-Profit Corporate structures), the form must be signed by an officer of the corporation. Qualifying officers include the following:
 - * Chairman of the Board
 - * President
 - * Chief Executive Officer
 - * Chief Financial Officer
 - * Corporate Secretary or Assistant Corporate Secretary
 - * Executive or Senior Vice President
 - * Vice President
 - * General Counsel
 - * Treasurer or Assistant Treasurer
 - * Controller or Assistant Controller
 - * Chief Accounting Officer
 - * Direct (Non-Profit ONLY)
- **(C) Partnership** If the business is a General Partnership of Limited Partnership, the form must be signed by a General Partner of the organization. A Limited Partner is approved to sign the from ONLY if this person has been specifically authorized by the partnership to participate in the control and management of the business.
- **(D) Limited Liability Company** If the business is a Limited Liability Company, the form must be signed by a Managing Member of the organization. A Manager is approved to sign the form ONLY if this person has been specifically authorized by the membership to participate in the control and management of the business.
- **(E) Government Agency** if the business is a Government Agency, the form must be signed by an officer of the agency. Qualifying officers include the following:
 - * Executive Officer
 - * Chief Administrative Officer
 - * Chief Financial Officer
 - * Finance Director
 - * Agency Director
 - * Department Head/Chief or Assistant Department Head/Chief
 - * Bureau Chief or Assistant Bureau Chief
 - * Division Chief
 - * Treasurer or Assistant Treasurer
 - * Controller or Assistant Controller
 - * Fiscal Officer
- **(F) Trust** If the business is a Trust, the form must be signed by EACH individual who has been appointed as a trustee. A copy of the Trust Agreement that gives the names of each trustee MUST be included with the ACH Enrollment form.
- **(G) Estate** If the business is an estate of a deceased individual, the form must be signed by either the executor or the administrator of the estate. Evidence of the appointment of the executor or administrator MUST be included with the ACH Enrollment form.