NATIONAL ASSOCIATION OF REALTORS®
VENDOR AUTHORIZATION FORM

FORWARD THE COMPLETED FORM VIA EMAIL:
Email: lhernandez@realtors.org       ATTN: Linda Hernandez, Finance
Phone: 312/329-8244

NAME OF NAR VENDOR: ____________________________

General Instructions:
- Complete the banking information below, sign and date form. All yellow highlighted fields are required to set up depository bank account.
- Only ONE bank account may be used.
- Set up requires 5 business days to take effect.

<table>
<thead>
<tr>
<th>Depository Bank Account Information:</th>
<th>New Account Setup</th>
<th>Change Deposit Account</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bank Name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City/State:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABA Routing # (must be 9 digits):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name on Account:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Account Number:</td>
<td></td>
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</tbody>
</table>

Type of Account: (check one only)
- Checking  ☐
- Savings  ☐
- Money Market  ☐

☐ Delete existing Direct Deposit bank information and add new bank account information listed above.

We are electing and authorizing the NATIONAL ASSOCIATION OF REALTORS® to transmit all future vendor payments via electronic funds transfer to the above listed bank account. Any changes to this account information will require vendor to submit a new authorization form. Where errors occur on the part of the Vendor’s bank, it is the Vendor’s responsibility to facilitate resolution of the error.

Signature: ____________________________  Date: ______________

Finance Use Only:
Vendor #: _________________________