

United States Electronic Funds Transfer (EFT) Form

All fields must be completed accurately to ensure timely payment

If you have questions, please contact invoices@santafe.edu

This is a fillable form. Please complete electronically

Recipient Information ~ All Fields Must Be Completed

Exact Account Holder or Full Business Name	
Recipient Street Address	
Recipient City	
Recipient State	
Recipient ZIP / Postal Code	
Recipient Phone Number	
Recipient Email	
Bank Routing Number (9 digits)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Bank Account Number	
Account Type	Checking <input type="checkbox"/> Saving <input type="checkbox"/>
Bank Name	
Additional Info (Optional)	

Recipient Signature: Joseph Martinez Date _____

**SFI is only responsible for making a good faith effort to execute your orders.
You agree to hold SFI harmless from any loss that occurs if your instructions are
incomplete, unclear or incorrect.**