



**COUNTY OF LOS ANGELES  
DEPARTMENT OF AUDITOR-CONTROLLER  
DIRECT DEPOSIT AUTHORIZATION FORM**

Control #: _____ For County Use Only
---

- ✓ **Mail to:** County of Los Angeles, Auditor-Controller, Disbursements Division, 500 W. Temple St, Room 502, Los Angeles CA 90012 – Attention: Direct Deposit Unit
- ✓ Please follow the attached instructions to complete **all** information on this form.
- ✓ Attach an original voided check, bank verification letter, or bank statement to this form.
- ✓ Please complete the form without any cross-outs or alterations and using **blue** ink only.

<b>1. Payee Name:</b>	<b>4. Vendor Number (Code):</b>
<b>2. Mailing Street Address:</b>	<b>5. Social Security Number/Taxpayer Identification #:</b>
<b>3. Mailing City, State and ZIP Code:</b>	<b>6. Direct Deposit Notification E-mail Address:</b>
<b>7. Name of Financial Institution:</b>	<b>8. Bank Routing Number:</b> <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"/> <input type="text"/>
<b>9. Bank Account Number:</b>	<b>10. Type of account: (Check one)</b> <input type="checkbox"/> Checking <input type="checkbox"/> Savings

**11. Attachment: (Check one)**

Original Voided Check   
 Original Bank Verification Letter   
 Bank Statement

**Payee Certification**

I hereby confirm my authority, as an authorized signer of the above-referenced payee, to the County of Los Angeles, Department of Auditor-Controller, or their agents, to direct deposit all entitled payments to the above-referenced bank account and to initiate (if necessary) debit entries or adjustments for any credit (1) that was made in error, (2) of an incorrect amount, or (3) that were duplicates of a correct payment.

This authorization will remain in effect until (1) five business days after a written cancellation request is received by the Auditor-Controller; or, (2) Auditor-Controller in its sole discretion determines to issue a warrant in place of an electronic deposit. I understand that if my account is closed without providing the Department of Auditor-Controller at least five business days written notice, my payment may be delayed.

I also understand that I will not receive remittance information via mail. Instead, I will need to access Vendor Self-Service to retrieve information about my payment(s) and/or enroll in receiving remittance information via e-mail.

**12. Print Authorized Representative Name and Title:**

\_\_\_\_\_

**13. Payee (or Authorized Representative) Signature:** \_\_\_\_\_ **14. Date:** \_\_\_\_\_

**15. Payee (or Authorized Representative) Phone Number:** (    )    -    \_\_\_\_\_

**16. Payee (or Authorized Representative) E-mail Address:** \_\_\_\_\_

**COUNTY OF LOS ANGELES**  
**DEPARTMENT OF AUDITOR-CONTROLLER**  
**DIRECT DEPOSIT AUTHORIZATION FORM**

**INSTRUCTIONS**

**HOW TO COMPLETE THIS FORM**

1. Payee Name – Must match all of the following:
  - Name on voided check/bank verification letter/bank statement
  - Name on file with the County
2. Mailing Street Address
3. Mailing City, State and Zip Code
4. Vendor Number (Code) – Unique identification number assigned to you by the County. If you do not have this, you may inquire with the department you are doing business with.
5. Social Security Number/ Taxpayer Identification # - Payee's Federal Tax ID #
6. Remittance Advice Email Address – Remittance advice will be sent to the e-mail address that you have provided. If you no longer wish to receive remittance advice via e-mail, please e-mail us at [Disb.DirectDeposit@auditor.lacounty.gov](mailto:Disb.DirectDeposit@auditor.lacounty.gov). Note that the same payment information is also available on Vendor Self-Service (VSS), see General Information below for additional information.
7. Name of Financial Institution
8. Bank Routing Number
9. Bank Account Number
10. Type of Account – Check either Checking **OR** Savings
11. Attachment – Check either Original Voided Check, Original Bank Verification Letter, OR First Page of Bank Statement
  - Bank verification letter must include the bank account number and holder's name, and must be printed on the financial institution's letterhead signed by an authorized bank representative.
  - First page of the bank statement must include the bank account number and holder's name.
  - Copies of the voided check or bank verification letter will not be accepted.
12. Print Authorized Representative Name and Title – If the payee is an organization, print the Authorized Representative Name **and** Title.
13. Payee (or Authorized Representative) Signature
14. Date
15. Authorized Representative's Phone Number
16. Authorized Representative's Email Address

Mail the completed direct deposit authorization form and supporting documents to the following address:

County of Los Angeles  
Auditor-Controller, Disbursements Division  
500 W. Temple Street, Room 502  
Los Angeles, CA 90012  
Attention: Direct Deposit Unit

**GENERAL INFORMATION**

- Register your organization's Vendor Self-Service Account (VSS). VSS is available 24 hours a day, 7 days a week and gives vendors access to remittance information and payment status. In addition, vendors may review their transaction history (such as contracts, invoices, and payments) which can be conveniently downloaded in Excel and/or PDF formats. Once enrolled in direct deposit, you may access your organization's payment information via VSS. You may register for VSS by accessing the following link: <https://lacovss.lacounty.gov/>. Click on the *VSS Vendor Activation Request* link to submit the VSS activation request online.
- The form must be completed without alterations and cross-outs and using blue ink only.
- Allow up to 15 business days to process the request.
- You will be notified by email if your application is rejected.
- Once you are eligible for direct deposit, all payments you receive from the County will be via direct deposit and you will not receive remittance information by mail. Instead, you will receive via e-mail a payment notification and the remittance information.
- E-mail us at [disb.directdeposit@auditor.lacounty.gov](mailto:disb.directdeposit@auditor.lacounty.gov) for direct deposit-related questions.