

SOMAH Electronic Deposit, Vendor ACH Form

for Application Deposit Refunds and Incentive Payments

Instructions

Please complete the form and have it signed by the Beneficiary or their authorized agent.

When complete, please merge this form with a copy of a VOID check and upload into your SOMAH application.

Payer Name and Address	Center for Sustainable Energy 3980 Sherman St., Suite 170 San Diego, CA 92110
Beneficiary Name	Payee name
Beneficiary Phone Number	Payee phone number
Beneficiary Bank Name	Payee's bank name
Beneficiary Bank Address	Bank address
Bank ACH Routing Number	Bank routing number
Beneficiary Account Number	Bank account number
Type of Account (Checking/Savings)	Checking or savings
Beneficiary Signature	