

KCT E-TRANSACTION

DATE _____

TO: Greg Gallagher
 Klickitat County Treasurer
treasurers@klickitatcounty.org

County Department/District/Agency _____ authorizes the Klickitat County Treasurer to process the following request.

INTERNAL TRANSFER

Description: _____

Transfer Amt: _____

Transfer To: (Bank Name) _____
 (4 Digit Acct #) _____

Transfer Date: _____

Settlement Date: _____

ADDTL INFO IF PROCESSING ACH PUSH:

Vendor: _____

Bank Name: _____

Acct #: _____

NOTE: The following info is only required upon original setup for the vendor.

Routing #: _____

Bank Address: _____

Bank Contact: _____ Phone: _____

Fund	Account	Description	Amount
		TOTAL	

Signature of Authorized Officer _____ Printed _____ Phone _____

KLICKITAT COUNTY TREASURER'S OFFICE
GREG GALLAGHER, TREASURER

509-773-4664
 205 S. COLUMBUS, ROOM 201
 GOLDENDALE, WA 98620
 (800) 766-5403
 FAX (509) 773-6301