

Electronic Funds Transfer Application



Company Information

Legal Name of Applicant	
d/b/a or Trade Name	
Address 1	
Address 2	
City, State, Zip	
E-Mail	
Company Contact	

Payments From Missouri Universal Service Fund

New Application Revision Cancellation

Beneficiary Bank Name	
Beneficiary Bank Address	
Name on Account	
ABA Routing Number	
Bank Account Number	
Bank Account Type	Checking <input type="checkbox"/> Saving <input type="checkbox"/>

Remittance of Surcharges to the Missouri Universal Service Fund

Beneficiary Bank Name	Central Bank
Beneficiary Bank Address	238 Madison, Jefferson City, MO 65102
Name on Account ("Vendor")	Missouri Universal Service Board
Account Type	Checking
ABA Routing Number	086 500 634
Bank Account Number	001036920
MoUSF Board Tax ID Number	43-1818855

Submission Date _____

Signature _____

Authorized Agent (Name) _____

Authorized Agent (Title) _____

Contact Information _____ Telephone _____ E-mail _____

Mail Executed Form and Payment To:

MoUSF Administrator
P.O. Box 14067 Parkville, MO 64152
or
E-mail Executed Form to:
MoUSF@QSIConsulting.com

Administrator Contact: 816.801.8145