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Australia Foreign/International Authorization Agreement and Enrollment for Direct Deposit and Remittance Advice

Mail To: Penguin Random House LLC Attn: Accounts Payable Department 400 Hahn Rd Westminster, MD 21157 Fax to: (410) 386-7339 Email to: AP-VM@penguinrandomhouse.com	Please complete this form and attach a voided check or bank verification letter to the address, fax or email listed to the left. The bank verification letter must be on bank letterhead and include the following: 1) the Bank State Branch Number (BSB), 2) bank name and address, 3) your account name and number, and 4) the bank representative's name and contact information. The BSB on the voided check or bank letter must match the BSB number provided below. If you have any questions or need assistance with this form, please call Penguin Random House Accounts Payable Office at 888-RH-PAYME.
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Vendor U.S. Tin, if any <input type="checkbox"/> SSN or ITIN <input type="checkbox"/> EIN _____	Type or use black ink to fill out form
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Vendor Information	Name (as shown on the Bank Account)	Contact Name
	Address (number and street)	Contact Telephone Number (include country calling codes)
	City or town, province or state, and country	Contact Email
	ZIP or foreign postal code	Effective Date, if other than as soon as possible:

Bank Information	Name	Type of Account <input type="checkbox"/> Checking <input type="checkbox"/> Savings
	Address (number and street)	Bank State Branch Number (BSB) <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
	City or town, province or state, and country	Depositor Acct No. (can include alpha, numbers or blank space) <div style="border: 1px solid black; width: 150px; height: 20px; margin: 5px auto;"></div>
	ZIP or foreign postal code	

Remit Information	Please choose ONE method for receipt of remittance advice: <input type="checkbox"/> None (payment only) <input type="checkbox"/> Email (PDF) <input type="checkbox"/> Email (Excel)	
	Remittance Email Address: (only one address can be used)	Lodgement Ref. or Sent behalf of: 1-18 Characters (Optional)

Note: All electronic payments will be made in foreign currency and not USD.

By signing this form, I authorize Penguin Random House LLC to initiate electronic credit entries to the checking or savings account at the financial institution identified above. I understand that payments and reimbursements may be made by Penguin Random House LLC to me or the vendor I represent and only to the bank account indicated. Any change to the bank account or to a new financial institution will require submission of a new "Authorization Agreement and Enrollment Form". Failure to notify Penguin Random House's Accounts Payable Department of an account change will delay payment.

Approver	Signature of Authorized Official (company officer, owner, or sole proprietor)		Signature Date
	Print or Type Authorized Official's Name	Telephone Number (include area code)	Email address
	Authorized Official's Title (president, CFO, controller, owner, freelancer, author, etc.)		Fax number