

Please complete the information in required fields based on the instructions on next page and submit the completed and signed form to LandlordEFT@mainstreetfamilycare.com. We may request additional information prior to proceeding with the request. Please allow 2-3 weeks for processing your request.

- Indicates Required Field *
- Form must be completed, signed, and dated or it will be returned as incomplete

For any questions email LandlordEFT@mainstreetfamilycare.com.

COMPANY INFORMATION		
Legal Company Name*		
Tax ID*	MainStreet Clinic Number*	
Preparer Name*	Email*	Phone Number*
OLD BANK INFORMATION *Required for Updates Only		
Bank Name		Name on Bank Account
ABA Routing Number (US)	SWIFT/BIC Code (Outside US)	Bank & Branch Number (Canada)
Bank Account Number		IBAN Number
NEW BANK INFORMATION *Foreign suppliers – please see additional information on next page		
Bank Name*		Name on Bank Account*
Provide Financial Institution Routing Number based on your institution location*		
ABA Routing Number (US)	SWIFT/BIC Code (Outside US)	Bank & Branch Number (Canada)
Bank Account Number*		IBAN Number
Remit Email Address*		Remit Format (Choose one)*
INTERMEDIARY BANK INFORMATION (if applicable)		
Bank Name		ABA Routing Number or SWIFT/BIC Code
AUTHORIZED SIGNER INFORMATION – An individual who is an authorized banking signatory (typically a CFO, Treasurer, Controller, VP Finance, Director, Manager, Owner, Legal Agent, etc.) to the financial institution and company outline on the form. By completing and signing this form you authorize MainStreet Family Care/KidsStreet Urgent Care to make payments to the bank account listed above.		
Signer's Name (please print)*	Title*	Email*
Signer's Signature*		Today's Date*

Instructions for completing the Electronic Funds Transfer (EFT) Form

COMPANY INFORMATION	
Legal Company Name	Complete legal name of institution: Corporate Entity includes Business Name/Doing Business As (DBA) and Care/Of, or name of Sole Proprietor
Tax ID	Provide Federal Tax Identification Number (TIN) or Federal Employer Identification Number (FEIN), Social Security Number (SSN) or VAT number
MainStreet Clinic Number	Provide MainStreet Clinic Number as outlined on the lease
Preparer Name	Name of person who completed the EFT form. The preparer cannot be the same as the authorized signer (except sole proprietor)
Email	Email address of the preparer
Phone Number	Phone number of the preparer
OLD BANK INFORMATION	
Bank Name	Name of financial institution that is requested to be changed
Name on Bank Account	Company or Account holders name that is requested to be changed
ABAA Routing Number (US)	Provide an ACH routing number that is requested to be changed
SWIFT or BIC Code (Outside US)	SWIFT or BIC Code that is requested to be changed
Bank & Branch Number (Canada)	Provide Bank Number and Branch Number that is requested to be changed
Bank Account Number	Must provide the existing account from which you are changing for EFT payment
IBAN Number	Must provide the existing IBAN number form which you are changing for EFT payment
NEW BANK INFORMATION	
Bank Name	Name of financial institution (e.g. Bank of America, Nova Scotia Bank)
Name on Bank Account	Company or Account holders name
ABA Routing Number (US)	Provide an ACH routing number that is 9 digits if your bank is in US
SWIFT or BIC Code (Outside US)	8 or 11 characters if bank is located outside US
Bank & Branch Number (Canada)	Provide Bank Number (3 digits) and Branch Number (5 digits) for Canadian banks
Bank Account Number	Account number at the financial institution to which EFT payments are to be deposited
IBAN Number	18 to 34 alphanumeric characters for European bank locations
Remit Email Address	Recipient's email address for notification of deposit. One email address is allowed, and a shared/generic box is preferred
Remit Format	Your payment remittance advice which is available in pdf or excel. Please choose one
INTERMEDIARY BANK INFORMATION	
Bank Name	Name of intermediary financial institution
ABA Routing Number or SWIFT Code	Is 9 digits for ABA or is 8 or 11 characters for SWIFT code
AUTHORIZED SIGNER INFORMATION	
Voided Check	Confirmation of account numbers and current remit address
Bank Statement	A bank statement shows the bank name, account name, and account number only
Bank Letter	A letter on bank letterhead that formally certifies the account owner's routing and account numbers