EFT FORM Instructions Page: Fiscal Sponsorship

Why do I need to fill out this form?

The electronic fund transfer form is required by our merchant service account in order to transfer funds to your bank account. For the Fiscal Sponsorship program this relates specifically to the release of funds for project-related expenses, see https://www.fracturedatlas.org/site/fiscal/fund_release for details on how to request a fund release.

Fractured Atlas requires BOTH a completed and signed EFT form AND a voided check to process an EFT request for a project. Please allow 1-2 business days for processing.

Please note a voided check or account confirmation letter from your financial institution are used to verify account information. Temporary/starter checks are not accepted.

Fractured Atlas Enrollment: How do we know you at Fractured Atlas? Please enter the name of the Fiscally Sponsored Project associated with the EFT account. Do NOT list a person, name of an organization or member who is not related to the EFT bank account.

Banking Information:

Bank Account Holder Name: This should be the name of the person or business listed on the bank account and bank statements. This should also correspond with the name listed on the check.

Bank Account Holder Address: Enter the address listed on your bank statement and check.

Bank Account Number: Enter the account number to which funds will be deposited, including applicable leading zeros.

Bank Routing Number: Enter the routing number, also referred to as the ABA number. It is ALWAYS 9 digits.

*Bank Routing Numbers are typically found on the bottom left of a check. Find the special characters I: the Bank Routing Number is between these characters.

Name of Bank: List the name of the financial institution to which the funds will be deposited.

Branch City, State, Zip: Enter the city, state, and zip code where your financial institution is located.

Type of Checking Account: Select if your bank account is a personal account or a business account.

Account Holder Signature: This form must be signed by an authorized account holder only.

Effective Date: This is the date the form is signed. This also constitutes the date you authorize EFT transactions with Fractured Atlas per the terms outlined on the form.

Please return only the completed and signed form along with a copy of a voided check/back up documentation by email or fax to:

support@fracturedatlas.org
Fax: 212-277-8025

Have other questions? Email us at support@fracturedatlas.org or call 888-692-7878

**This instruction page is for your reference only. It should not be returned to Fractured Atlas with the form.**
ELECTRONIC FUND TRANSFER SIGN UP FORM

Please see Instructions Page for information on completing this form.

Fractured Atlas Program Enrollment: Check off the program you’re enrolling in and enter details

- Artful.ly (enter Organization Name):

- Fiscal Sponsorship (enter Project Name):

Banking Information (all fields below are required)

Bank Account Holder Name:

Bank Account Holder Address:

Bank Account Holder Phone Number:

Bank Account Number:

Bank Routing Number:

Name of Bank:

Branch City, State, Zip:

Type of Checking Account: _____ Personal _____ Business

By completing and signing this form, I am confirming I am the bank account holder and authorizing Fractured Atlas to make electronic fund transfers into the named account, and, if necessary, make withdrawals from the account to cover any negative account balances or transactions credited in error. I understand a return fee may be applied if account information provided is incorrect.

ACCOUNT HOLDER SIGNATURE:

Effective date: (this can be the current date)

This completed and signed form along with a copy of a voided check/back up documentation must be returned to Fractured Atlas, per the details listed in the Instructions Page.