



State of Louisiana
Louisiana Department of Health
Office of Public Health

ACH Agreement

This agreement is entered into between the State of Louisiana, Louisiana Department of Health, Office of Public Health, Center for Community and Preventive Health, Special Supplemental Nutrition Program for Women, Infants and Children (WIC), hereinafter referred to as "LA WIC" and _____,

Vendor Name and Number

hereinafter referred to as "Vendor".

The agreement is effective _____ and applies to the bank account below.
Date

Financial Institution Name: _____

Address: _____

City, State Zip: _____

Type of Account: _____

Routing #: _____ Account #: _____

Vendor authorizes LA WIC to pay for services and obligations enumerated in the WIC Vendor Agreement using the ACH Network. Generally, these payments will be in the form of ACH credits to the Vendor's account. Vendor authorizes LA WIC to originate debit entries without notice to correct erroneous credits. Vendor also authorizes LA WIC to refund all transaction reimbursements using the ACH Network. No entry, payments, and/or reimbursements shall be initiated except in conformity with the authorization provided for in this agreement. LA WIC and Vendor agree to comply with all applicable state and federal laws and regulations including, but not limited to; any National Automated Clearing House Rules. LA WIC and Vendor further agree that neither party will initiate or transmit any entry and/or payments that violate the laws of the United States, including, but not limited to; any laws related to economic or trade sanctions administered or enforced by the Office of Foreign Asset Control (OFAC).

Either party may terminate this agreement at any time by giving thirty (30) days written notice to the other party. Notwithstanding such termination, this agreement shall remain in force and effect as to all transactions that have occurred prior to the date of the termination.

Authorized Vendor Representative Name (printed)

Authorized Vendor Representative Title

Authorized Vendor Representative Signature

Date