

# Electronic Vendor Payment

### **Enrollment Information**

Complete the enclosed Rapid Revenue enrollment form

An online enrollment form is available at www.villageofgrayslake.com/vendors

 Mail the completed enrollment form, with a voided check or pre-printed deposit slip to:

Village of Grayslake 10 South Seymour Avenue Grayslake, IL 60030

Completed enrollment forms can also be returned with any future invoice.

## **Payment Information**

Payments are made via Electronic Funds Transfer (EFT) on Wednesday following the 1<sup>st</sup> and 3<sup>rd</sup> Tuesday of each month. An email notification is sent three (3) business days prior.

All payments are made in accordance with the Illinois Prompt Payment Act.

#### **Prompt Payment Act Information**

The Village of Grayslake is governed by the Illinois Prompt Payment Act (50 ILCS 505). This law stipulates that local governments must approve or disapprove a bill from a vendor within thirty (30) days after receipt of such bill or within thirty (30) days after the date on which the goods or services were received, whichever is later. Any bill approved for payment shall be paid within thirty (30) days after the date of approval.



10 South Seymour Avenue Grayslake, IL 60030

> (847) 223-8515 (847) 223-4821 fax

www.villageofgrayslake.com





Electronic Vendor Payment





# **Electronic Vendor Payment**

Rapid Revenue allows vendors to have their payments deposited in an authorized checking or savings account via Electronic Funds Transfer (EFT).

#### **Fast**

payments are deposited on Wednesday following the 1st and 3rd Tuesday of each month

#### Secure

payments are deposited directly in an authorized checking or savings account

#### **Payment Notification**

an email notification is sent three (3) business days prior to the transaction date

# • Enroll Today •

#### Save Time

Rapid Revenue payments are automatic and, because funds are transferred electronically, available immediately.

No more waiting for payments to be mailed or checks to clear.



Please Print

# **Enrollment Form**

## **Vendor Information**

Name			FEIN	
Address				
		street		
		city	state	zip
Phone			Fax	
Email				REQUIRED FOR PAYMENT NOTIFICATION
Bank In	forma	tion		
Dalik III	IIOIIIIa	uon		
Name				
Checking		Routing #		_
Savings		Account #		_
Terms and	Condition	ns		
approval of bil the Illinois Pro	lls by its Boar mpt Paymen	d of Trustees at their regularly sc t Act (50 ILCS 505). Notification (	listed above via Electronic Funds Transfi heduled meetings on the 1st and 3rd Tueso of a pending EFT payment, including the iree (3) business days prior to the transact	day of each month in accordance with deposit amount and transaction date,
Direct Dep	osit Restri	iction Notice		
does <b>NOT</b> offe - a foreign l	r Electronic F bank	unds Transfer (EFT) to either:	nanged regarding the use of direct depos ial deposit will be forwarded to a bank in	-
I AGREE	TO THE 1	FERMS AND CONDITION	NS LISTED ABOVE	
Signature			Date	
Print Name	<u> </u>		Title	