

# Bill Pay

## Payee Information Collection Form

To complete this form, fill in all bill pay information or you can choose to copy the information directly from each payee under the details link online banking. You may need more than one form. Please contact us with any questions or concerns. If you have multiple bills made payable to the same payee, you may want to set up a nickname for the payee.

Payee Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Nickname: \_\_\_\_\_ Payment Amount: \_\_\_\_\_ Recurring: \_\_\_\_\_ Frequency: \_\_\_\_\_

Payee Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Comment: \_\_\_\_\_

Payee Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Nickname: \_\_\_\_\_ Payment Amount: \_\_\_\_\_ Recurring: \_\_\_\_\_ Frequency: \_\_\_\_\_

Payee Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Comment: \_\_\_\_\_

Payee Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Nickname: \_\_\_\_\_ Payment Amount: \_\_\_\_\_ Recurring: \_\_\_\_\_ Frequency: \_\_\_\_\_

Payee Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Comment: \_\_\_\_\_

Payee Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Nickname: \_\_\_\_\_ Payment Amount: \_\_\_\_\_ Recurring: \_\_\_\_\_ Frequency: \_\_\_\_\_

Payee Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Comment: \_\_\_\_\_