



Oconee County Board of Commissioners

Finance Department

John Daniell, Chairman
Mark Thomas, Post 1
Chuck Horton, Post 2
Amrey Harden, Post 3
Mark Saxon, Post 4

November 17, 2023

Accounts Receivable:

Oconee County values each relationship established with our vendors. It is our goal to promptly and efficiently issue payment for approved invoices. In continued efforts to streamline our payment process, we request that you enroll in our Automated Clearing House (ACH) payments. ACH payments offer several benefits, including fast and secure transactions and electronic remittance detail.

If you would like to learn more about this payment option, please contact our Accounts Payable team at 706-769-2944 or financedept@oconee.ga.us. To begin receiving ACH payments, complete the attached authorization form and follow the submission instructions.

Thank you for your partnership with Oconee County.

Sincerely,

A handwritten signature in blue ink that reads "Melissa Braswell".

Melissa Braswell
Finance Director

Authorization for Direct Deposit (ACH Credits)

Company Name: Oconee County Board of Commissioners

I (we) hereby authorize Oconee County Board of Commissioners ("COMPANY") to electronically credit my (our) account [and, if necessary, electronically debit my (our) account to correct erroneous credits] as follows:

☐ Checking Account / ☐ Savings Account (select one) at the depository financial named below ("DEPOSITORY"). I (we) agree that ACH transactions I (we) authorize comply with all applicable law.

Depository Name _____

City _____ State _____ Zip _____

Routing Number _____

Account Number _____

Amount of credit(s) or method of determining amount of credit(s) or specify range of acceptable dollar amounts authorized _____

Date(s) and/or frequency of credit(s) _____

I (we) understand that this authorization will remain in full force and effect until I (we) notify COMPANY by written notification that I (we) wish to revoke this authorization in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to cancel this authorization.

Printed Name(s) _____

ID Number _____

Date _____ Signature(s) _____

Email _____

Submit this form with a voided check or bank account confirmation letter to:

Oconee County Board of Commissioners
ATTN: Finance
7635 Macon Highway
Box 700
Watkinsville, GA 30677

Or Fax to with a coversheet to: 706-310-3574 (Attention Finance)