

PAYMENT INFORMATION FORM

	t you receive your payment, AJWS requires the following information. You have the option of direct. In addition to this form, you must complete an IRS W-9 tax form.	t
	Please process my payments via check. (Please complete the personal information section below. Please process my payments via direct deposit. (Please complete the personal information and banking information sections below.) IMPORTANT NOTE : only payment for services can be pa via direct deposit. Reimbursements (including airfare reimbursements) and cash advances can only be paid via paper check, so please provide a valid mailing address.	id
Please return	this form via fax or post. Do not email this form back to AJWS.	
Personal Infor	rmation	
Name:		
Home Addres	s:	
Mailing Addre	SS:	
Home Phone:		
Cell Phone:		
E-Mail:		
*Social Securit	zy Number:	
Date of Birth:		
Banking Inform	mation (for payments for services only)	
	Hadon (101 payments 101 services only)	
Account#:		
Type of Accou	int ¹	