Payment Processing and Compliance

Supplier Onboarding

New Supplier set up and payment enrollment. Existing Supplier changes or updates.

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August 2026

Important

- The presentation will be recorded. All Zoom participants will receive an email with the link to the recording. The recording will also be available on the Purchase, Pay & Travel website following the session.

- All participants are automatically muted on Zoom to avoid any background noise throughout the presentation.

- Enter any questions into the chat feature of Zoom throughout the presentation.

Supplier Set Up and Updates Overview

1. All forms required for new supplier set up, supplier reactivation, and supplier updates
    - W-9, W-8BEN, W-8BEN-E
    - Individual SVF and Business SVF
2. The information that the supplier must fill out on these forms.
3. Where to locate these forms
4. Which forms to use and when
5. Common reasons why these forms are returned for corrections
6. How to request a supplier name or address update

All new suppliers, inactivate suppliers, and supplier updates will require one of the following.

W-9

- US Citizens
- US Citizens living abroad
- US Business
- Resident Alien

W-8BEN

- Foreign Individual

W-8BEN-E

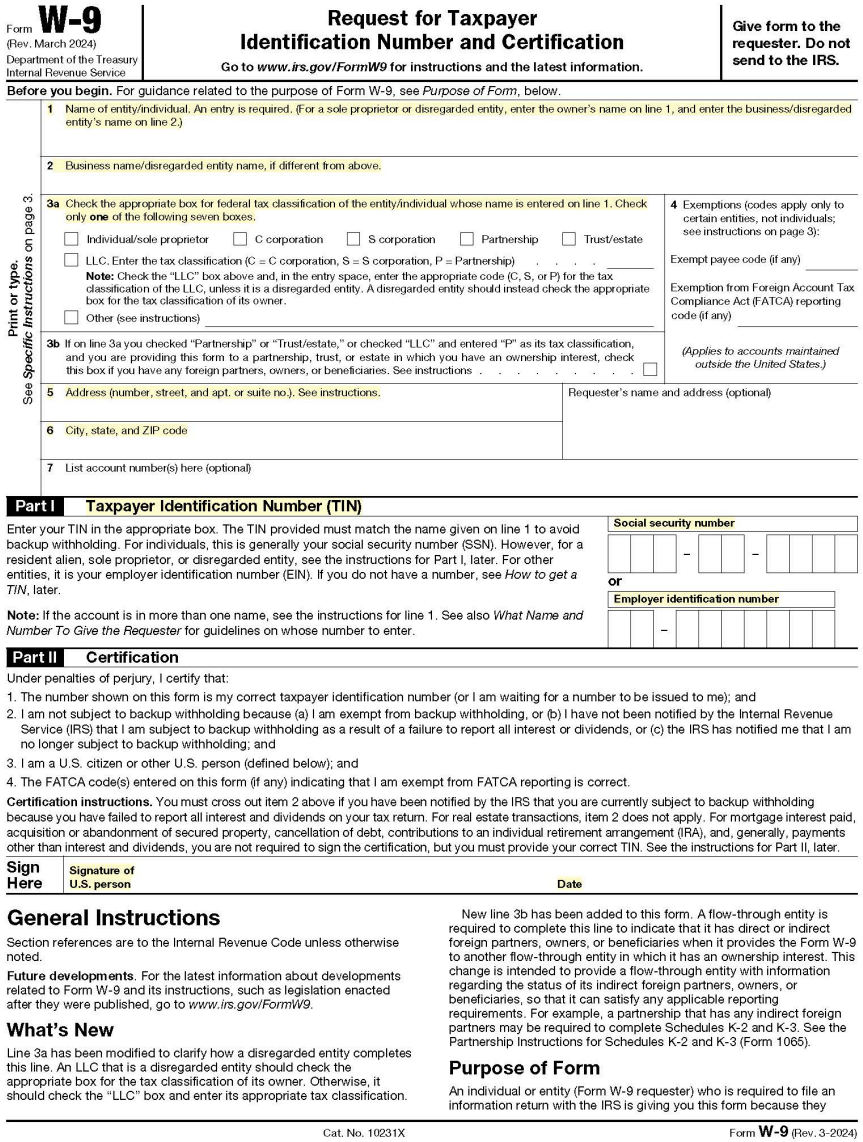
- Foreign Business

University of Pittsburgh

W-9 FORM

Required Fields

- Name – Individual or Tax Reportable
- Business Name –Only required if they have a DBA (Doing Business As)
- Tax Classification box along with the additional information if LLC or Other box is checked
- Full mailing address including Apartment or Suite #, PO Box, Zip Code
- TIN – SSN or EIN
- Sign and Date



Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

2 Business name/disregarded entity name, if different from above.

Print or type. See Specific Instructions on page 3.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . .

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . ☐

5 Address (number, street, and apt. or suite no.). See instructions.

Requester's name and address (optional)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

– –

or

Employer identification number

–

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here **Signature of U.S. person** **Date**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

Cat. No. 10231X Form **W-9** (Rev. 3-2024)

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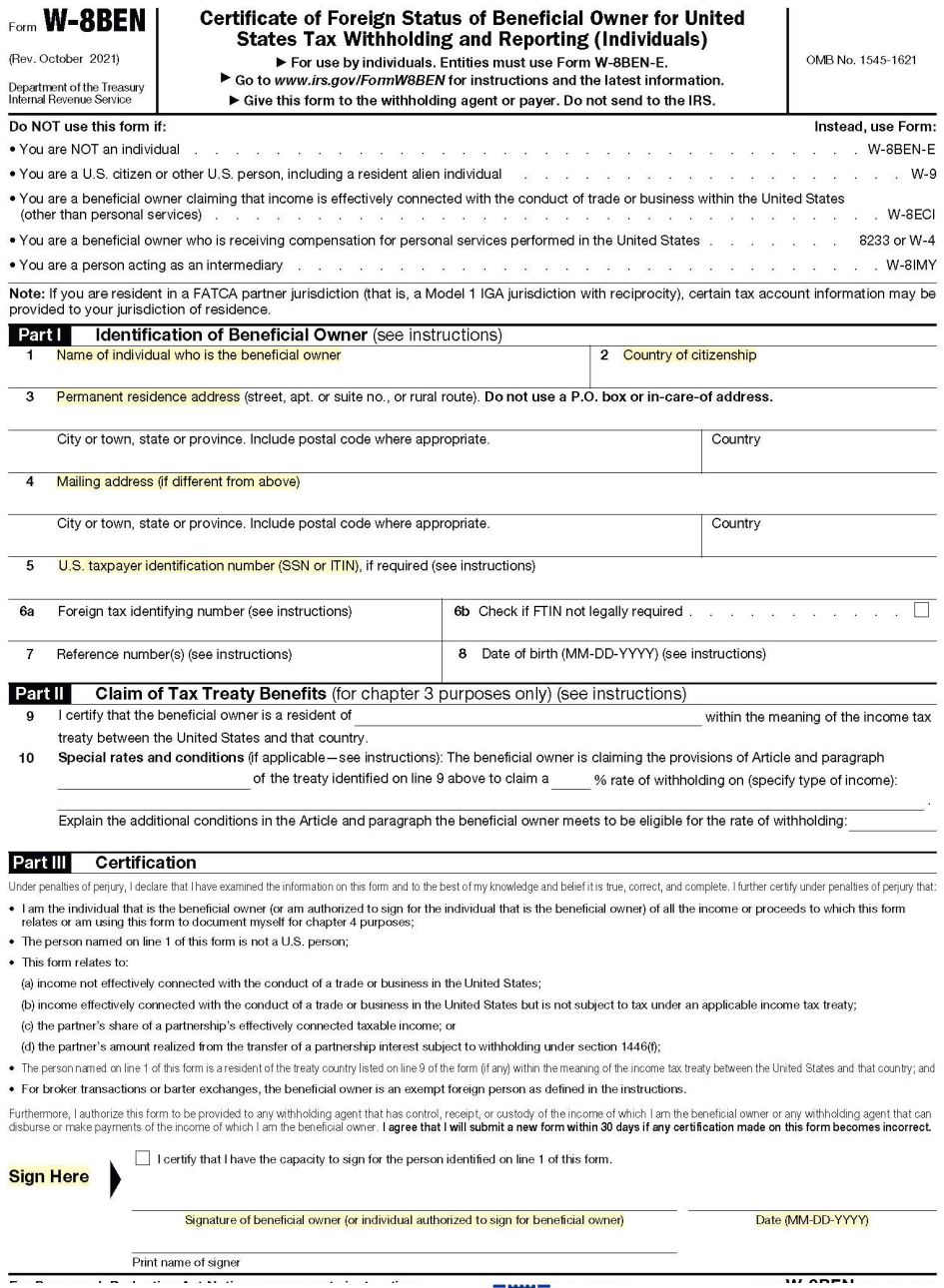
W-8BEN FORM

Required Fields

- Foreign Individual's Name
- Country of Citizenship
- Full permanent address including the country
- Full mailing address if different from permanent
- US Tax ID – if they have one, they must include it
- Sign and Date



Form **W-8BEN**
(Rev. October 2021)
Department of the Treasury
Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)
▶ For use by individuals. Entities must use Form W-8BEN-E.
▶ Go to *www.irs.gov/FormW8BEN* for instructions and the latest information.
▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do NOT use this form if: — **Instead, use Form:**
- You are NOT an individual . . . W-8BEN-E
- You are a U.S. citizen or other U.S. person, including a resident alien individual . . . W-9
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the United States (other than personal services) . . . W-8ECI
- You are a beneficial owner who is receiving compensation for personal services performed in the United States . . . 8233 or W-4
- You are a person acting as an intermediary . . . W-8IMY

Note: If you are resident in a FATCA partner jurisdiction (that is, a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.

Part I **Identification of Beneficial Owner** (see instructions)

1 Name of individual who is the beneficial owner — 2 Country of citizenship

3 Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box or in-care-of address.**

City or town, state or province. Include postal code where appropriate. — Country

4 Mailing address (if different from above)

City or town, state or province. Include postal code where appropriate. — Country

5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)

6a Foreign tax identifying number (see instructions) — 6b Check if FTIN not legally required ☐

7 Reference number(s) (see instructions) — 8 Date of birth (MM-DD-YYYY) (see instructions)

Part II **Claim of Tax Treaty Benefits** (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 **Special rates and conditions** (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 9 above to claim a ____ % rate of withholding on (specify type of income): _____.

Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding: _____

Part III **Certification**

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income or proceeds to which this form relates or am using this form to document myself for chapter 4 purposes;
- The person named on line 1 of this form is not a U.S. person;
- This form relates to:
  (a) income not effectively connected with the conduct of a trade or business in the United States;
  (b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an applicable income tax treaty;
  (c) the partner's share of a partnership's effectively connected taxable income; or
  (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f);
- The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here ☐ I certify that I have the capacity to sign for the person identified on line 1 of this form.

Signature of beneficial owner (or individual authorized to sign for beneficial owner) — Date (MM-DD-YYYY)

Print name of signer

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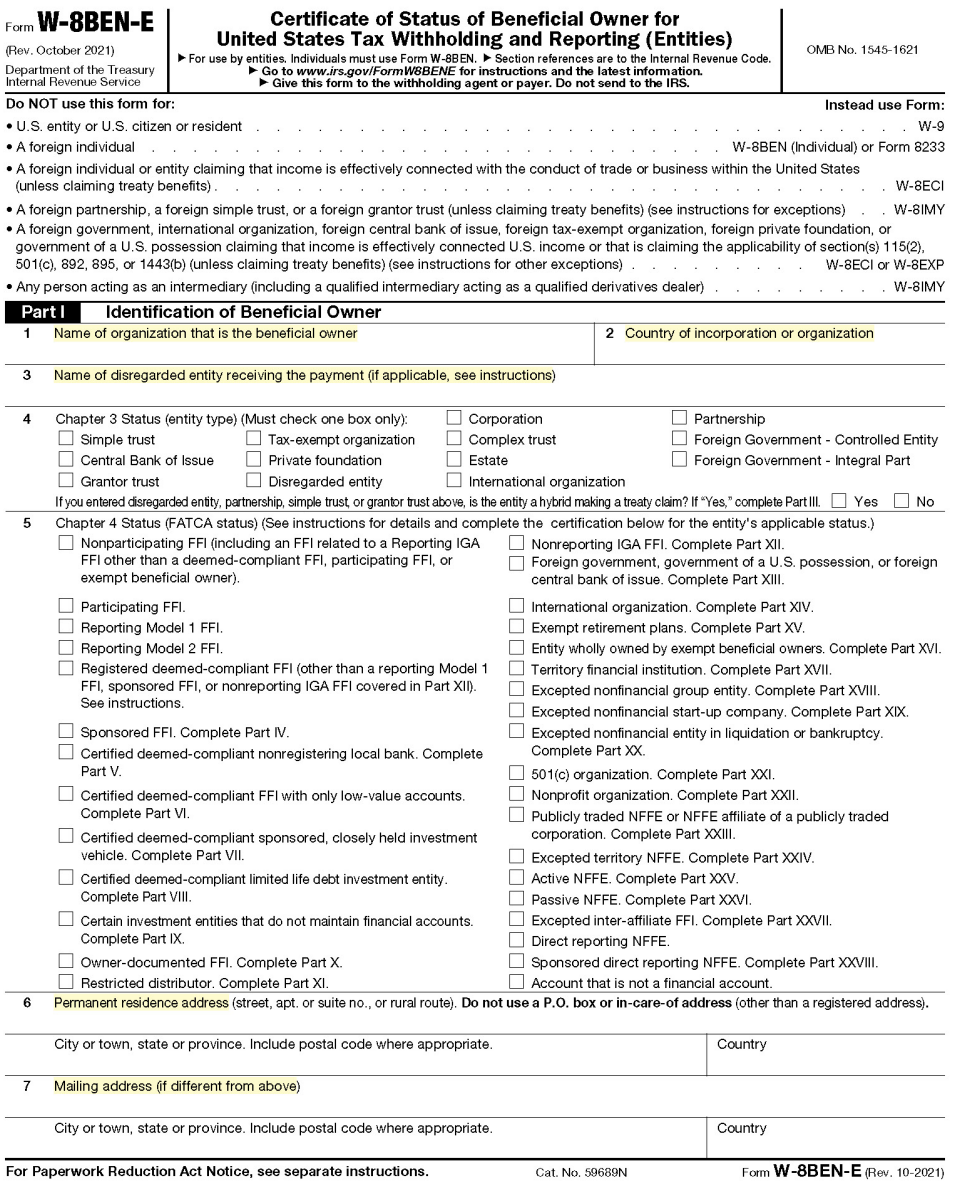
W-8BEN-E FORM

Required Fields

- Name of organization on line 1– DBA on line 3 if they have one
- Country of organization
- Full permanent address
- Full mailing address if different than permanent
- US Tax ID - only required if they have one
- Sign and Date



Form **W-8BEN-E**
(Rev. October 2021)
Department of the Treasury
Internal Revenue Service

Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities)
▶ For use by entities. Individuals must use Form W-8BEN. ▶ Section references are to the Internal Revenue Code.
▶ Go to *www.irs.gov/FormW8BENE* for instructions and the latest information.
▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do NOT use this form for: — **Instead use Form:**

- U.S. entity or U.S. citizen or resident . . . W-9
- A foreign individual . . . W-8BEN (Individual) or Form 8233
- A foreign individual or entity claiming that income is effectively connected with the conduct of trade or business within the United States (unless claiming treaty benefits) . . . W-8ECI
- A foreign partnership, a foreign simple trust, or a foreign grantor trust (unless claiming treaty benefits) (see instructions for exceptions) . . . W-8IMY
- A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession claiming that income is effectively connected U.S. income or that is claiming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b) (unless claiming treaty benefits) (see instructions for other exceptions) . . . W-8ECI or W-8EXP
- Any person acting as an intermediary (including a qualified intermediary acting as a qualified derivatives dealer) . . . W-8IMY

Part I **Identification of Beneficial Owner**

1 Name of organization that is the beneficial owner — 2 Country of incorporation or organization

3 Name of disregarded entity receiving the payment (if applicable, see instructions)

4 Chapter 3 Status (entity type) (Must check one box only):
☐ Corporation ☐ Partnership
☐ Simple trust ☐ Tax-exempt organization ☐ Complex trust ☐ Foreign Government - Controlled Entity
☐ Central Bank of Issue ☐ Private foundation ☐ Estate ☐ Foreign Government - Integral Part
☐ Grantor trust ☐ Disregarded entity ☐ International organization
If you entered disregarded entity, partnership, simple trust, or grantor trust above, is the entity a hybrid making a treaty claim? If "Yes," complete Part III. ☐ Yes ☐ No

5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status.)
☐ Nonparticipating FFI (including an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner).
☐ Participating FFI.
☐ Reporting Model 1 FFI.
☐ Reporting Model 2 FFI.
☐ Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XII). See instructions.
☐ Sponsored FFI. Complete Part IV.
☐ Certified deemed-compliant nonregistering local bank. Complete Part V.
☐ Certified deemed-compliant FFI with only low-value accounts. Complete Part VI.
☐ Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part VII.
☐ Certified deemed-compliant limited life debt investment entity. Complete Part VIII.
☐ Certain investment entities that do not maintain financial accounts. Complete Part IX.
☐ Owner-documented FFI. Complete Part X.
☐ Restricted distributor. Complete Part XI.
☐ Nonreporting IGA FFI. Complete Part XII.
☐ Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII.
☐ International organization. Complete Part XIV.
☐ Exempt retirement plans. Complete Part XV.
☐ Entity wholly owned by exempt beneficial owners. Complete Part XVI.
☐ Territory financial institution. Complete Part XVII.
☐ Excepted nonfinancial group entity. Complete Part XVIII.
☐ Excepted nonfinancial start-up company. Complete Part XIX.
☐ Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX.
☐ 501(c) organization. Complete Part XXI.
☐ Nonprofit organization. Complete Part XXII.
☐ Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIII.
☐ Excepted territory NFFE. Complete Part XXIV.
☐ Active NFFE. Complete Part XXV.
☐ Passive NFFE. Complete Part XXVI.
☐ Excepted inter-affiliate FFI. Complete Part XXVII.
☐ Direct reporting NFFE.
☐ Sponsored direct reporting NFFE. Complete Part XXVIII.
☐ Account that is not a financial account.

6 Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box or in-care-of address** (other than a registered address).
City or town, state or province. Include postal code where appropriate. — Country

7 Mailing address (if different from above)
City or town, state or province. Include postal code where appropriate. — Country

For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 59689N Form **W-8BEN-E** (Rev. 10-2021)

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SUPPLIER VERIFICATION FORMS (SVF)

Individual SVF

This form can only be used for suppliers that are individuals using a Social Security Number (SSN) as their tax identification number (TIN). If the individual supplier has a business name or they are using an Employer Identification Number (EIN) instead of a SSN, they must use the business SVF.

Business SVF

This form should be used for all suppliers other than individuals. All businesses and sole proprietors are required to use this form.

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INDIVIDUAL SUPPLIER VERIFICATION FORM (SVF)

Required Fields

- Full Name
- Full mailing address including apartment number if they have one
- Phone Number
- Email address
- Sign and Date
- Section 2 must be completed by the department

University of Pittsburgh

Individual SVF

University of Pittsburgh

Supplier Verification Form: Individuals Only

l Suppliers are defined as individual people providing a good or service to the University of Pittsburgh in exchange for Individuals providing a service as part of a community engagement project are also considered individual suppliers. This ppropriate for Individuals ONLY. No businesses should complete this form.

1: To be completed by the Individual Supplier

I. New Individual Supplier Information:

Individual's First Name_____ Middle Name_____ Last Name_____

Address of Individual_____

City, State and Zip Code_____

County_____

Ph#_____ Email _____ Fax# _____

II. Type of Organization: (check one)

☐ U.S. Person, as defined by the IRS: If checked, complete and include IRS Form W-9.
☐ Foreign (non-U.S.) Individual: If checked, complete and include an original IRS W-8BEN

A. Demographics (check all that apply)

☐ *HUB Zone Small Business (SBA Certified) ☐ *Institute for Entrepreneurial Excellence (IEE) Member
☐ *LGBT Certified ☐ *Minority-Owned ☐ *Qualified Non-Profit for the Blind or Severely Handicapped
☐ *Service-Disabled Veteran-Owned ☐ *Small Disadvantaged Business (SBA Certified) ☐ *Veteran-Owned ☐ *Woman-Owned

B. Check All That Apply

☐ *African American ☐ *Native American ☐ *Aleuts, Alaskan American ☐ *Asian Indian American
☐ *Asian Pacific American ☐ *Hispanic American ☐ *MBE/WBE Certified: If checked, include a copy of the certificate.

III. Choosing your preferred payment method:

IMPORTANT: A link to EDENRED PAY platform will be sent to the email address listed. Enrollment in ACH/Direct Deposit must be completed through the EDENRED PAY link.

Your payment type options are: Virtual Card, ACH/Direct Deposit or Check

Do not choose **Virtual Card** if you cannot accept a credit card payment. Virtual credit card payments are credit card payments made to the supplier by the University and should only be chosen by individual suppliers who can accept a credit card payment or who sign up to accept credit card payments. Standard credit card processing fees apply. If you are not currently set up to accept credit card payment but would like to begin that process, the University can share a list of credible companies for you to explore. Contact PPTcustomerservice@cfo.pitt.edu to obtain this listing.

Individual Authorization

By signing below, the individual supplier hereby certifies and represents that the information provided is correct, current, and complete. The authorized individual supplier also certifies that he or she will notify the University of Pittsburgh of any changes to said information. The individual supplier further agrees to accept purchase orders based upon the University of Pittsburgh's general and to provide to the University as needed.

Individual's Name_____

Signature of Individual_____

Date Signed_____

*FAR 52-219 (a) (4) Misrepresentation of business status as a small, small disadvantaged, small woman-owned, small HUB Zone, small veteran-owned, service disabled small veteran- owned concern for the purpose of obtaining a subcontract that is to be included as part or all of a goal contained in the requesting Contractor's subcontracting plan, without remedy, can result in severe penalties. Under 15 U.S.C.645 (d), any person who misrepresents a firm's status in these same categories in order to obtain a contract to be awarded under the preference programs established pursuant to the Small Business Act or any other provision of Federal law, shall be punished by imposition of fine, imprisonment, or both, be subject to administrative remedies including suspension and debarment, and be ineligible for participation in programs conducted under the authority of the Act.

Business Supplier Verification Form (SVF)

Required Fields

- Business Name– Must match the business name on the W9 or W-8BEN-E
- Address of Business
- Authorized Representative – First and last name of the suppliers authorized representative who is filling out this form and will be signing this form
- Phone Number and Email Address of authorized representative
- Remittance Address – This is a physical address where a check would be mailed, regardless of their payment selection. There should NOT be an email address in this field.
- PO Email Address
- Accounts Receivable Email Address – This should be the suppliers contact for the person who will be completing the ACH or VC enrollments.
- Sign and Date
- Section 2 must be completed by the department

University of Pittsburgh

Business SVF

Docusign Envelope ID: 398BFAFD-6D7D-48FA-8533-2EF1EF7B2373

ersity of
tsburgh

Supplier Verification Form: For New Suppliers Only

on 1: To be completed by the Supplier
structions:

New Supplier Information (see instructions for other changes)

Business Name_____

DUNS # (if applicable)_____

Address of Business_____

Address of Business, cont'd_____

County of Business_____

Authorized Representative: First Name_____ Last Name _____

Ph#_____ Email _____ Fax# _____

Remittance Address_____

Remittance Address, cont'd _____

PO Email Address _____ PO Fax #_____

Choose your preferred payment method:

Accounts Receivable Email Address:_____

If payment method is not chosen, it will default to check payment with payment terms of Net 60 days. Link is valid for 30 days

☐ Virtual Card - USD — Payment Terms are **Immediate** upon final approval of invoice.
☐ ACH/Fed Wire — Payment Terms are **Net 45 days**
☐ Check — Payment Terms are **Net 60 days**

*Virtual Card should only be chosen if supplier can accept credit card payments. Virtual card payment will come to supplier as a credit card payment.

A link to EDENRED PAY platform will be sent to the email address listed. Enrollment in ACH/Direct Deposit must be completed through the EDENRED PAY link.

Type of Organization - *Check all applicable selections:*

☐ U.S. Business, as defined by the IRS: If checked, complete and include IRS Form W-9.
☐ Foreign (non-U.S.) Business: If checked, complete and include an original IRS W-8BENE

Size & Demographics of U.S. Business

☐ U.S. Large Business
☐ U.S. Small Business - *Check all applicable selections:*
☐ *HUB Zone Small Business (SBA Certified) ☐ *Institute for Entrepreneurial Excellence (IEE) Member
☐ *LGBT Certified ☐ *Minority-Owned ☐ *Qualified Non-Profit for the Blind or Severely Handicapped
☐ *Service-Disabled Veteran-Owned ☐ *Small Disadvantaged Business (SBA Certified)
☐ *Veteran-Owned ☐ *Woman-Owned

Minority-Owned U.S. Business Enterprise Information - *Check all applicable selections:*

☐ *African American ☐ *Native American ☐ *Aleuts, Alaskan American ☐ *Asian Indian American
☐ *Asian Pacific American ☐ *Hispanic American ☐ *MBE/WBE Certified: If checked, include a copy of the certificate.

WHERE ARE THESE FORMS LOCATED?

The newest forms will always be in Docusign...

Go into DocuSign from the eSignature Service app in MyPitt. Select the Templates tab and on the left sidebar, you should see Shared Folders.

If you click that dropdown to display the folders you have access to, you will see the PITT CFO –DO NOT DELETE folder. Every employee in the University's system has access to this folder

The names of these forms are...

PITT CFO SVF/W-9 (individuals Only) for a US individual

PITT CFO SVF/W-8BEN (personal) for a foreign individual

PITT CFO SVF/W-9 for a business

PITT CFO SVF/W-8BEN-E for a foreign business

SUBMITTING IN PANTHEREXPRESS

Required Forms for New or Inactive Suppliers

- W9, W-8BEN, or W-8BEN-E
- Supplier Verification Form (SVF)

Common reasons forms are returned for corrections

- Missing information on W9 or SVF
- Supplier provided an email address on the remittance address line on SVF
- Submitting an old SVF
- Using the individual SVF for a business
- Payment terms have been altered on the SVF

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SUBMITTING IN CONCUR – GUEST POLICY

Individuals are the only suppliers that can be set up through Concur's guest policy

Required Forms for New or Inactive Suppliers

- W-9 or W-8BEN
- Individual SVF if they would like to enroll in ACH payments. We highly recommend this.

Common reasons forms are returned for corrections

- Missing SSN on W-9
- Missing Apartment #, City, State, or Zip Code in the Address
- Submitting to the guest policy for an active employee – The individual must make you a delegate so that you can submit to the Travel/Non Travel policy
- Submitting a W-9 or W-8 which includes a business name or EIN instead of a SSN

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ACTIVE SUPPLIER UPDATES

Please contact PPT Customer Service for supplier updates with the following documentation/information.

- Name updates will require an updated W-9, W-8BEN, or W-8BEN-E
- Address updates will require an updated W-9, W-8BEN, or W-8BEN-E
- To add an additional remittance (payment) address that differs from the address on the W-9 or W-8, please provide an invoice or bank letter from the supplier showing this address.
- If any of the addresses currently set up for the supplier are old, you can include that information when you contact PPT Customer Service and we can inactivate the old address.

University Payment Options

Virtual Card

Immediate Term

Must be able to process a credit card payment in USD. This is not a cash card it cannot be used to make purchases online.

ACH/DD/EFT Wire

Net 45

ACH is available for domestic bank accounts. All foreign bank accounts will require Fed Wire.

Check

Net 60

Mailed via USPS and requires a 6 wk window before any void reissue for non receipt will be processed.

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Types of Supplier Enrollment

New Supplier

Auto Set Net 60

Individuals/Small Local: Immediate

Information to enroll is pulled from the Remittance (payment) section of the Supplier Verification Form.

Unenrolled Existing Supplier

Net 60

Request taken from dept or supplier. Letter and Link is sent to enroll. Follow up call or documentation to approve required.

New Remittance already enrolled

Term matches enrollment

Identified by PPT Staff creating new remit address. Confirmation by email or phone that the payment type and banking information has not changed and the enrollment is copied to the new address.

Enrollment Changes

Request taken from dept's or supplier. Confirmation by email or phone regarding change of terms is confirmed prior to a new link. Updating banking additionally requires a phone verification.

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Foreign Suppliers

Virtual Card

Immediate Term

Must be able to process a credit card payment in USD. This is not a cash card it cannot be used to make purchases online.

ACH/EFT/DD

Net 45

ACH is available for all domestic bank accounts. Must be paying in USD. ACH bank letter, remittance email, contact name and phone number required.

Federal Wire

Net 45

All foreign banks or foreign currency must be paid by Fed Wire. Wire Form and the source document required.

Check

Not available to foreign addresses.

University of Pittsburgh

Pennsylvania State Map

Small Local Businesses must be located in one of the 5 communities listed in yellow.

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Enrollment Letter

- Payment Options & Terms
- Edenred Link
- Details how to enroll in desired payment option.

University of Pittsburgh | Purchase, Pay, & Travel

Dear valued University of Pittsburgh supplier,

The University of Pittsburgh has partnered with J.P. Morgan as the University's banking partner and as a result is implementing the Edenred Pay platform. With this program, our suppliers will be able to choose their desired payment method (virtual credit card*, ACH/direct deposit or check).

The Edenred Pay platform offers our suppliers a variety of benefits, including:

- Improved flexibility with payment terms
- Increased convenience through multiple new digital payment methods
- Greater certainty of payment by eliminating mailing delays
- Detailed electronic remittance data (i.e. information about what invoices were paid) via email.
- Immediate availability of funds without needing to deposit checks at the bank

These payment methods come with various payment terms.

Virtual Credit Card payments* are at Immediate payment terms
ACH/Direct deposit is at 45-day terms
Paper Check will be at 60-day terms.

Next Steps:
This week - Pitt's Payment Processing team will email you a link to the Edenred Pay platform tomorrow. The email will be from *noreply@pay.edenredpay.com*. **Please note that the link is only good for 7 days.** You will continue to receive check payments at Net 60 until enrollment is completed. You must log into the Edenred Pay platform to choose your payment method.

When you enroll - there will be three payment method options available for you to choose.

1. **Virtual Card** - only choose this option if your business can accept a credit card in USD payment. If your business cannot accept this type of payment, please select ***No and ACH yes if you are enrolling in ACH.***
2. **ACH/Direct Deposit** - this is a simple direct deposit made to your bank account. When your payment is made, you will receive an email that lists the invoice numbers that were paid with that deposit so that you can keep track of the payment from the University. All cells with * asterisk will need to be completed.
3. **Check payment** - please keep in mind that if you choose a check, your payment is subject to mail delays. We still encourage you to select the virtual card (if you can accept a credit card payment) or ACH/Direct Deposit payment options. Checks require a six-week delivery window before they are reissued . If you are requesting a paper check, no action needs to be taken on the link.

Additional Information:

- **Immediate Payment Terms** are defined as once the University receives your invoice and it's been approved by all applicable parties; the payment will be processed. *It does not mean same or next day payment.*
- The chart attached outlines the virtual credit card payment method for suppliers.
- If you have questions about enrollment into Edenred Pay Platform please contact the Vendor Enrollment Team via Email at vendors@edenred.com or Phone 1-844-727-7973.

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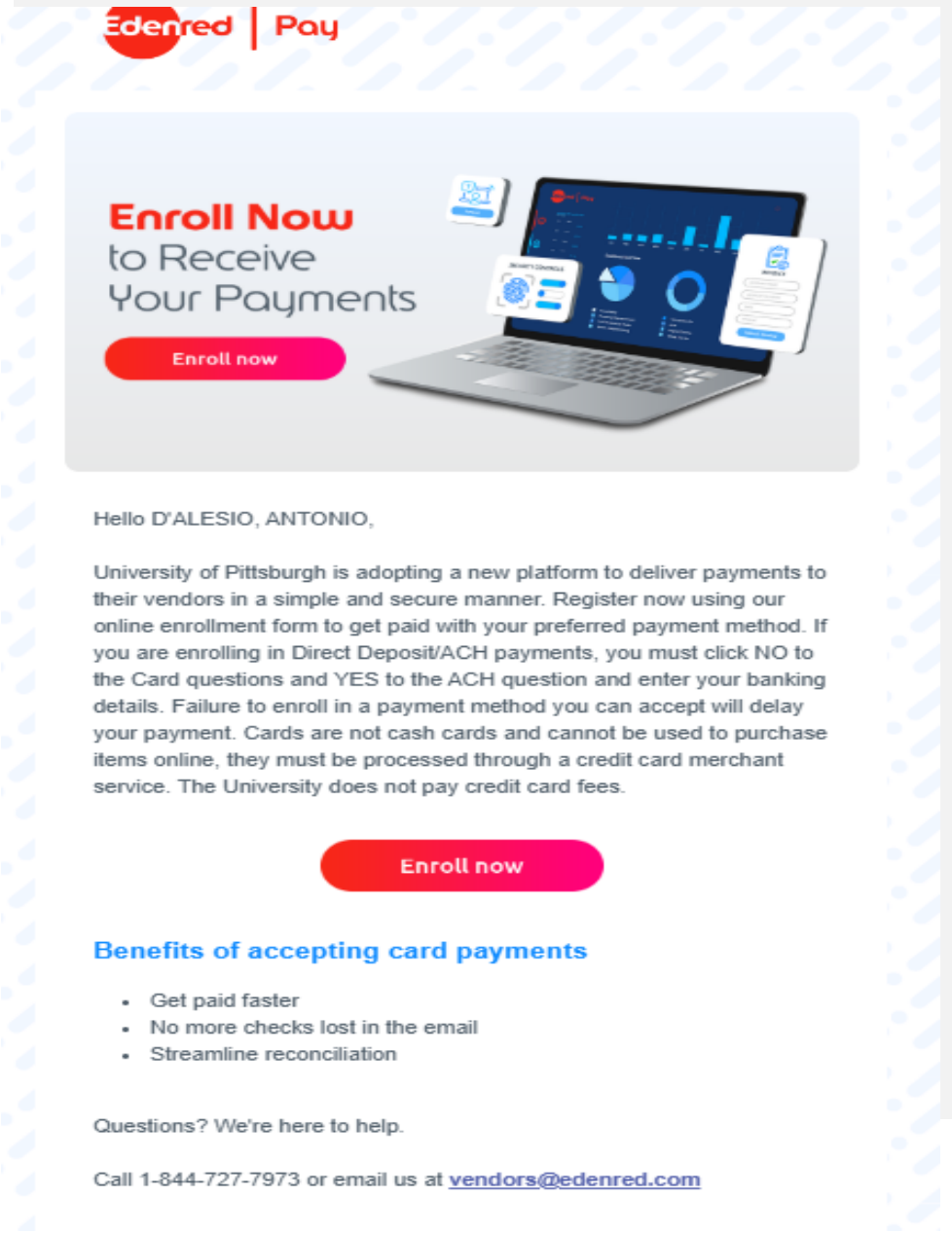
Enrollment Link:

- Supplier Name & #
- Contact Name
- Contact Phone #
- Remittance(payment) Address
- Contact Email
- Payment method requested.



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Enrollment Link:

- From: noreply@pay.edenredpay.com

Hello D'ALESIO, ANTONIO,

University of Pittsburgh is adopting a new platform to deliver payments to their vendors in a simple and secure manner. Register now using our online enrollment form to get paid with your preferred payment method. If you are enrolling in Direct Deposit/ACH payments, you must click NO to the Card questions and YES to the ACH question and enter your banking details. Failure to enroll in a payment method you can accept will delay your payment. Cards are not cash cards and cannot be used to purchase items online, they must be processed through a credit card merchant service. The University does not pay credit card fees.

Enroll now

Benefits of accepting card payments

- Get paid faster
- No more checks lost in the email
- Streamline reconciliation

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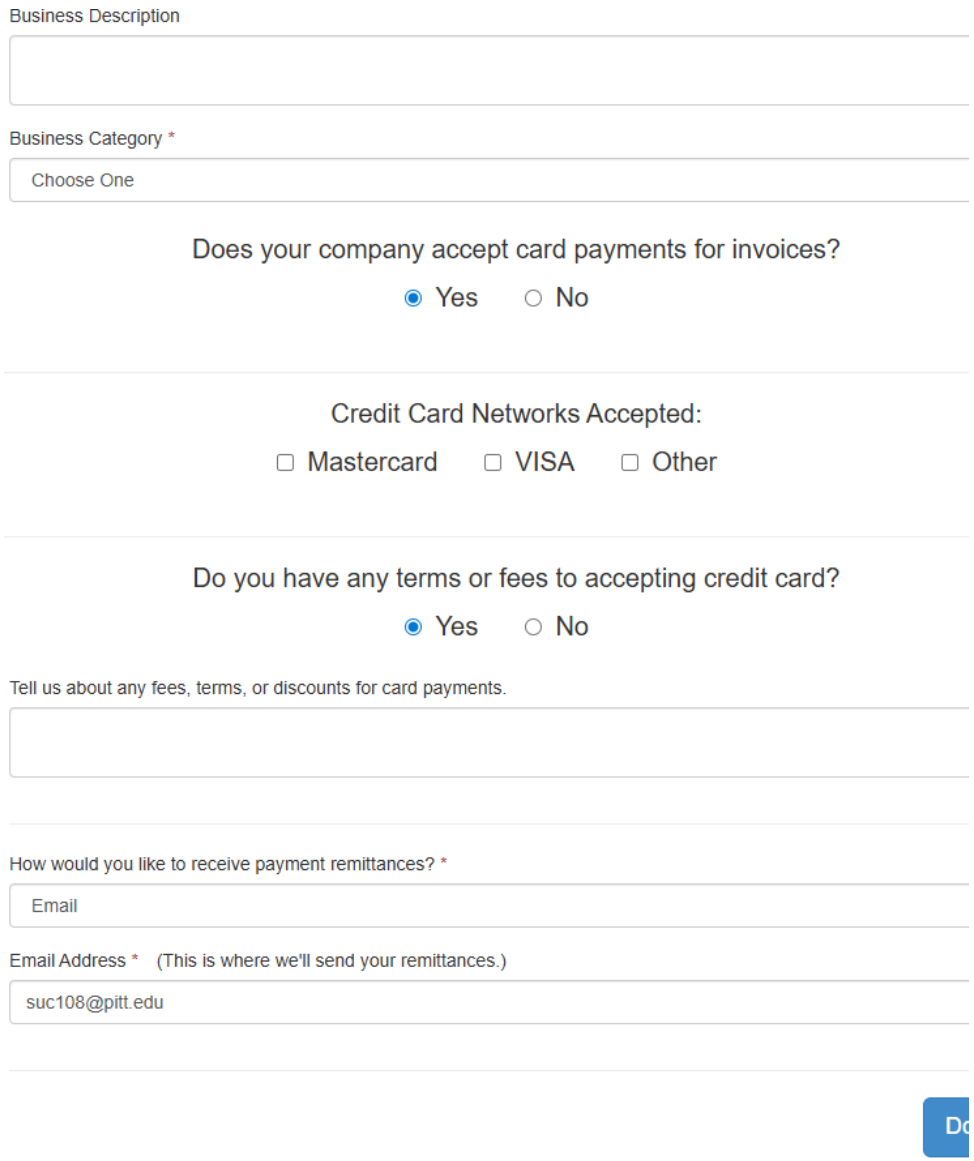
Virtual Card Enrollment

- VC Methods Available
  - Email
  - Call In
  - Fax
  - Portal
  - URL
  - Other



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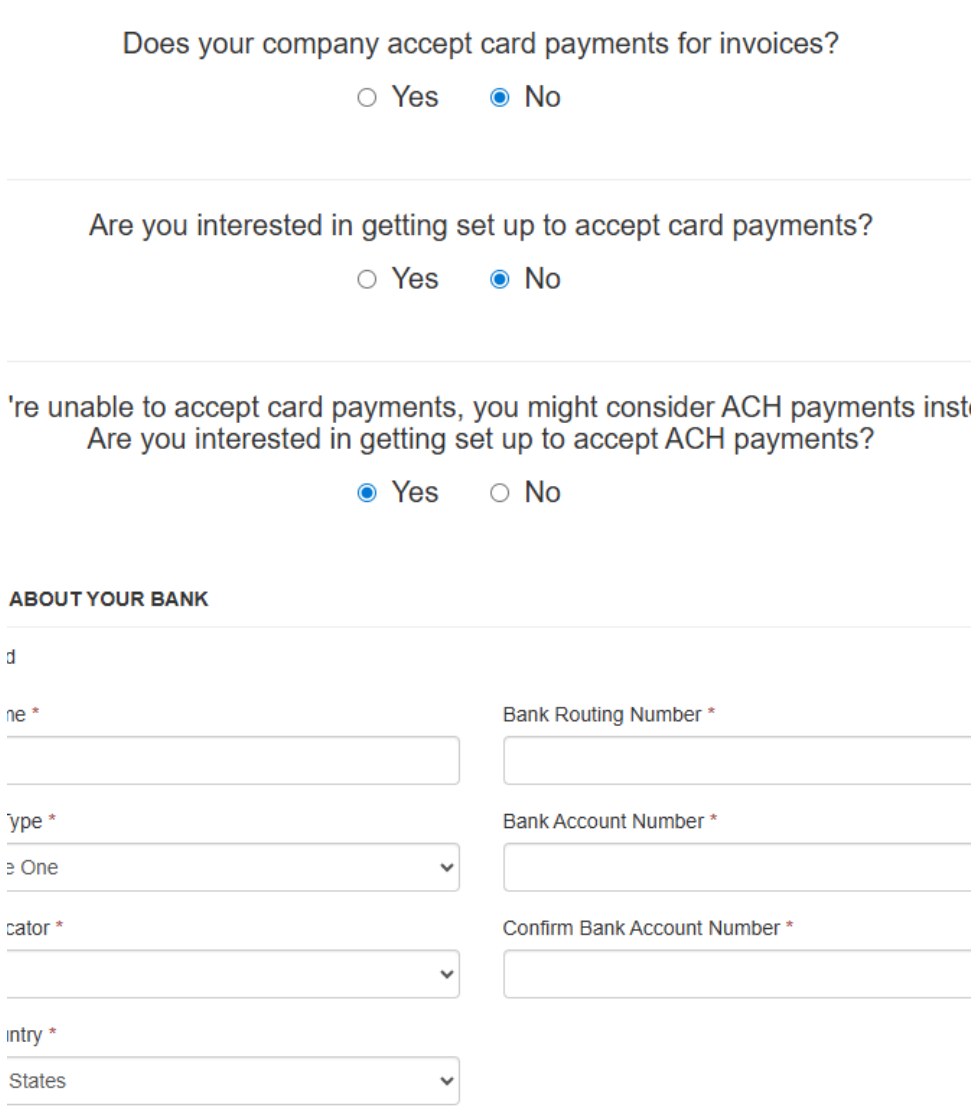
ACH Enrollment

- GIACT Responses
  - Successful Validation
    - No further action required
  - Risky Validation
    - Validating document required
  - Declined Validation
    - Reentry of ACH information required



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Paper Check

- No action required.
- All suppliers are paid by check mailed via USPS until they successfully enroll in electronic payment method.
- Checks require a six-week delivery window before they are reissued.
- Globally checks pose the highest potential for fraud.

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Questions?

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