



HONORABLE RAY VALDES SEMINOLE COUNTY TAX COLLECTOR

P.O. Box 630 * Sanford, FL, 32772-0630 * 407-665-1000 * www.seminoletax.org



Memorandum

TO: Tax Certificate Holders

FROM: Ray Valdes

RE: Option for Automatic Deposit of Redemption Checks

The Seminole County Tax Collector provides the opportunity for an automatic tax certificate payment redemption check deposit service. Documentation is mailed to the bidder upon the redemption of a tax certificate, but the funds can be directly deposited into the bidder's designated bank account.

This is a voluntary option at no additional cost to you.

If you are interested in participating in this program, complete and return the form below to our Delinquent Tax Department at your convenience. Each bidder number account must submit a completed form. If you prefer to fax the form, you may do so at 407-665-7647.

Customer Name Ray Valdes, Seminole County Tax Collector
 In Vision Short Name: Seminole County Tax Collector In Vision Customer Number: 30386
 Settlement Account #:

2	0	7	9	9	0	0	1	1	2	8	0	7
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<input type="checkbox"/> Delete Account(s)																
<input type="checkbox"/> New Set-Up	<input type="checkbox"/> Change _____															
Originator Entry Class <input checked="" type="checkbox"/> CCD	Transaction Type <input checked="" type="checkbox"/> Credit															
Receiving Bank Routing Transit Number:	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>															
Receiving Bank Name:	_____															
Receiving Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings															
Receiving Account Number:	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>															
Receiving Individual Name:	_____															
Receiving ID (FEIN/SSN):	_____															