Electronic Funds Transfer (ACH) Enrollment

Accelerate California Innovation Grant Program · Agreement No. 25GOB044

CAP Contract Alliance, LLC, Fiscal Agent for the California Office of the Small Business Advocate
Official Program Form 25GOB044-ACH · Revision 07/2026 · Questions: 541-668-4117 · tiffany@capcontractalliance.com

Complete this form only after CalOSBA issues your notice of intent to award. Your Grant Agreement provides that the award is paid by electronic funds transfer to the account you designate here. Return it with a completed IRS Form W-9 and the attachment described in Section 3.

PROTECT YOUR BANKING INFORMATION

- Submit this form only through the secure upload link CCA sends with your notice of intent to award.
- Never email this form. It carries your account number.
- CCA will never request banking changes by email and will never send new payment instructions by email.
- Call 541-668-4117 to confirm any payment request that appears to come from CCA.

Section 1 · Grantee Identification

All entries must match your executed Grant Agreement and your California Secretary of State record.

TO BE COMPLETED BY GRANTEE

Legal business name Exactly as it appears on the Secretary of State filing and the Grant Agreement	
DBA or trade name Enter N/A if none	
Award Number Format ACAIG2026-C##, shown on your notice of intent to award	
Federal Employer Identification Number Nine digits, no dashes	
Secretary of State entity number	
Business address Must match the address on the Grant Agreement	
Authorized representative — name and title Must be the person who signed the Grant Agreement	
Email address	
Telephone	

Section 2 · Bank Account Information

The account must be a business account held in the legal business name shown in Section 1. Personal accounts, third-party accounts, and payment-app accounts cannot be used.

TO BE COMPLETED BY GRANTEE

Complete in ink. Print one character per box.

Bank or credit union name	
Bank city and state	
Account holder name Exactly as it appears on the account record	
Account type Mark one	☐ Business checking ☐ Business savings
ACH routing number Nine digits. Use the ACH routing number, not the wire routing number — they are often different.	
Account number	
Re-enter account number A mismatch between the two entries voids the form.	

Section 3 · Required Attachment

Attach one of the following. Your enrollment cannot be processed without it.

- A voided check drawn on the business account, showing the business name preprinted on the check; or
- A bank-issued account verification letter on bank letterhead, signed or stamped by the bank, showing the account holder name, routing number, and account number.

> **DEPOSIT SLIPS ARE NOT ACCEPTED**
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> Deposit slips frequently show an internal processing number rather than the ACH routing number. A payment sent to that number will be rejected or misdirected, and reissuing it will delay your award.

Section 4 · Authorization and Certification

Read this section before signing.

I certify that I am the authorized representative of the business named in Section 1 and that the information provided on this form is true, complete, and correct. I certify that the account identified in Section 2 is held in the name of that business.

I authorize CAP Contract Alliance, LLC, acting as Fiscal Agent for the California Office of the Small Business Advocate, to initiate a credit entry to the account identified in Section 2 for the purpose of disbursing the Accelerate California Innovation Grant award. I further authorize CAP Contract Alliance, LLC to initiate any debit entry or adjusting entry necessary to correct an erroneous credit to that account. This authorization remains in effect until the award is disbursed or until I revoke it in writing.

I understand that CAP Contract Alliance, LLC will verify this enrollment by telephone before any payment is released, and that no change to these banking details will be accepted by email or telephone. Any change requires a newly signed form.

SIGNATURE — TO BE COMPLETED BY GRANTEE

Signature	
Printed name and title	
Date signed Written in full — for example, August 14, 2026	

Section 5 · Changing or Cancelling This Enrollment

- Submit a new signed form through the secure upload link. Changes are not accepted by email, telephone, or text message.
- Notify CCA at least ten business days before closing or changing the account if your award has not yet been disbursed.
- CCA confirms every change by outbound telephone call to a number obtained independently of the change request, not to a number supplied on the new form.