



TEXAS A&M INTERNATIONAL UNIVERSITY
A Member of The Texas A&M University System

1099/1042-S Misc. Income Agreement

Please be advised that in order to comply with IRS Regulations, Texas A&M International University will include/consider all unsubstantiated travel expenses reimbursed or incurred on behalf of a contractor as taxable income. Thereby income in excess of \$600.00 will be reported to the IRS and will generate a 1099 miscellaneous income form for any U.S. contractor. For non-U.S. contractors, taxable income will be reported to the IRS and to the individual on a Form 1042-S.

Additionally, per System regulation 25.99.03, Contracting for External Consultants and Professional Services, section 1.6.2, "An individual who offers to perform a consulting service for a System component, and who has been employed by any System component or by another state agency at any time during the two years preceding the making of the offer, must disclose in the offer to perform a consulting service, the nature, date of termination and annual rate of compensation of the previous employment. If the individual contracts with the System component without complying with this requirement, then the contract is void."

I understand that any reportable payments made to me will be reported to the IRS & myself.

Additionally, I certify that I _____ have _____ have not been employed by the Texas A&M System or any of its members within the past 12 months, and I _____ have _____ have not been employed by another state agency at any time during the past two years.

Signature of Contractor

Date

Social Security Number or Federal ID Number

TEXAS A&M INTERNATIONAL UNIVERSITY

VENDOR DIRECT DEPOSIT AUTHORIZATION



Under Ch. 559, Government Code, you are entitled to review, request, and correct information we have on file about you, with limited exceptions in accordance with Ch. 552, Government Code.

INSTRUCTIONS

- Use only BLUE or BLACK ink.
- Alterations must be initialed.
- Check all appropriate box(es).
- Fax this form and copy of voided check to
TAMIU Accounts Payable Dept.: 956-326-2139

TRANSACTION TYPE

SECTION 1	New setup	(Sections 2, 3 & 4)	Change financial institution	(Sections 2, 3 & 4)
	Cancellation	(Sections 2 & 3)	Change account number	(Sections 2, 3 & 4)
			Change account type	(Sections 2, 3 & 4)

PAYEE IDENTIFICATION

SECTION 2	1. Social Security number or Federal Employer's Identification (FEI)		2. Mail code (If not known, will be completed by Paying State Agency)		
	3. Name		4. Business phone number		
	5. Mailing address	6. City	7. State	8. ZIP code	
	9. E-Mail address				

AUTHORIZATION FOR SETUP, CHANGES OR CANCELLATION

SECTION 3	<p>➤ Pursuant to Section 403.016, Texas Government Code, I authorize Texas A&M International University to deposit by electronic transfer payments owed to me by TAMIU and, if necessary, debit entries and adjustments for any amounts deposited electronically in error.</p> <p>➤ TAMIU shall deposit the payments in the financial institution and account designated below. I recognize that if I fail to provide complete and accurate information on this authorization form, the processing of the form may be delayed or that my payments may be erroneously transferred electronically.</p> <p>➤ I authorize the Texas Comptroller of Public Accounts to deposit my payments from the state of Texas to my financial institution electronically. I understand that the Texas Comptroller of Public Accounts will reverse any payments made to my account in error. I further understand that the Texas Comptroller of Public Accounts will comply at all times with the National Automated Clearing House Association's rules. (For further information on these rules, please contact your financial institution.)</p> <p>➤ I consent to and agree to comply with the National Automated Clearing House Association Rules and Regulations and the University's rules about electronic transfers as they exist on the date of my signature on this form or as subsequently adopted, amended or repealed.</p>				
	10. Authorized signature		11. Printed name		12. Date
	Will these payments be forwarded to a financial institution outside the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO				

FINANCIAL INSTITUTION (Completion by financial institution is recommended.)

SECTION 4	13. Financial institution name		14. City		15. State	
	16. Routing transit number		17. Customer account number (Dashes required <input type="checkbox"/> YES)		18. Type of account <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	19. Representative name (Please print)			20. Title		
	21. Representative signature (Optional)			22. Phone number		23. Date

CANCELLATION BY AGENCY

SEC. 5	24. Reason	25. Date
---------------	------------	----------

**For additional information or assistance, please contact the Accounts Payable Department by:
Email: accountspayable@tamiu.edu Phone: 956-326-2147**