

VENDOR PAYMENT INSTRUCTION FORM



This form is for adding or deleting Vendor Payment Instructions to your TexSTAR accounts. Please TYPE all information. Please indicate in the box provided if these are to be added to the account for future use ONLINE. Forms with alterations (i.e. white out, mark out, etc.) will NOT be accepted.

Participant Name: _____ Effective: _____

Instruction 1: Add Instructions to Account for Online Use? ☐ Delete ☐

Vendor Name: _____ TexSTAR Account #: _____

Bank Name: _____ ABA #: _____

Account Number: _____ Account Name: _____

Amount: _____

For Further Credit: _____

Instruction 2: Add Instructions to Account for Online Use? ☐ Delete ☐

Vendor Name: _____ TexSTAR Account #: _____

Bank Name: _____ ABA #: _____

Account Number: _____ Account Name: _____

Amount: _____

For Further Credit: _____

Instruction 3: Add Instructions to Account for Online Use? ☐ Delete ☐

Vendor Name: _____ TexSTAR Account #: _____

Bank Name: _____ ABA #: _____

Account Number: _____ Account Name: _____

Amount: _____

For Further Credit: _____

TexSTAR Representative will call to verify instructions and USER ID with both Authorized Representatives.

Signature: _____

First Authorized Representative (required)

Signature: _____

Second Authorized Representative (required)

Telephone Number

Telephone Number

TexSTAR Primary Verification (internal)

TexSTAR Secondary Verification (internal)

Please complete this form either all typed or all handwritten with original signatures.
Forms with alterations (i.e. white out, mark out, etc.) or electronic signatures will **NOT** be accepted.

TexSTAR Participant Services
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