## **Progressive Supplier Set-Up Request for EFT (Electronic Funds Transfer)**

Suppliers please complete the form below in its entirety. This information will be used to verify the information you provided on your company is complete and accurate within our Supplier Master prior to granting you access to our iSupplier portal where you will enter your banking information to convert your payments from Draft to EFT.

Once you have submitted this form Progressive will issue you a User ID and a Password to access iSupplier. We will also provide you with a User Training Manual that will outline the instructions on how to enter your banking information, mange your banking information and view your invoices and payments.

## **How to Submit this Form**

You may save a copy of this form for yourself after completion. To submit the form click on the Submit by Email button in the top right-hand corner. You will be prompted to select an Email Client, (Desktop or Internet). If you choose Desktop the form will automatically attach itself to an Email and be ready to send. If you choose Internet you will be prompted to save a copy of the form and submit the form through your Internet Provider via an Email attachment. Please use the subject line of Supplier Request for EFT when submitting your completed form this way. Send the form to <a href="mailto:isuppliersupport@progressive.com">isuppliersupport@progressive.com</a>.

If you have any questions regarding the completion of this form or otherwise, send an Email to <a href="mailto:isuppliersupport@progressive.com">isuppliersupport@progressive.com</a>.

Supplier Legal Name (name						
Supplier Doing Business As Name						
Organization Type (choose from list)						
Tax Identification/Social Security Number (TIN/SS)						
Physical Address (cannot be a PO Box)						
City		State		Zip		
Bill To Address (choose same as physical address, if not different)						
City		State		Zip		
Email Address						
This Email will be used to register you with access to iSupplier, Progressive's Supplier Self-Service Portal						
EFT Email Address						
This Email address will be used to send your EFT Remittance Advice.						
Phone Number						
Authorized User: First and Las	t Name					
*Person Responsible for reviewing financial transactions						
For Progressive Supplier Maintenance Use ONLY						
Oracle Supplier #		Oracle Supplier Na	ame			
Date Entered		Oracle Supplier Site	e ID #			
Completed By						

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