

CITY OF LOS ANGELES

CALIFORNIA

DIANA MANGIOGLU
DIRECTOR OF FINANCE
CITY TREASURER



ERIC GARCETTI
MAYOR

OFFICE OF FINANCE
PAYMENTS PROCESSING
200 N. SPRING ST., ROOM 101
LOS ANGELES, CA 90012

IMPORTANT NOTICE FOR REMITTERS OF CITY TAX PAYMENTS \$50,000 AND OVER:
TAX PAYMENTS MUST BE MADE BY ELECTRONIC FUNDS TRANSFER
VIA AUTOMATED CLEARING HOUSE (ACH)

On September 25, 2004, Ordinance No. 176160 became effective requiring all tax payments of \$50,000 or greater to be made by electronic funds transfers. A review of our records indicates your previous tax payment(s) fall into this category and this ordinance may apply to you. For all future tax payments equal to or greater than \$50,000, you are required by City ordinance to use the ACH method of remittance and must pre-register by returning this letter to our office with the bottom portion filled out. Upon receipt, we will contact you to complete the registration process and discuss the ACH remittance information required on the attachment.

After registration, we will need two components from you when the time comes to pay your taxes – the ACH funds transfer with detailed remittance information plus your completed original tax renewal reporting form providing the basis for your tax liability. The forms may be returned via U.S. mail or emailed to **Finance.ACH@lacity.org**. If you have already arranged for ACH electronic payments with our office, you need to contact your bank to modify your existing reporting format regarding the “Structured” payment information line as shown in the attachment. Thank you in advance for your cooperation.

ACH REGISTRATION INFORMATION REQUIRED: Please fill out the fields below and return this page by mail or fax prior to your first ACH payment (*you only need to submit this page once*). If you have any questions, please contact our ACH Coordinator at (213) 922-9690 or by email **Finance.ACH@lacity.org**. Thank you.

Legal Name of Business: _____

Tax Registration Certificate Account No.: _____

FEIN No.: _____

Contact Name: _____ Title: _____

Phone Number: (____) _____ Date: _____

Contact Email: _____

EMAIL: Finance.ACH@lacity.org
Automated Clearing House (ACH) Coordinator

