

Bulk Payment Interface Instruction Guide

Version 1.8 Updated –March 2, 2022



Background

In accordance with the State of California Revenue and Taxation Code Section 2503.2 (b), the tax collector for any city, county, or city and county may, in his or her discretion, require any taxpayer, or any paying agent of a taxpayer or taxpayers, who makes an aggregate payment of fifty thousand dollars (\$50,000) or more on the two most recent regular installments on the secured roll or on the one installment of the most recent unsecured tax roll, to make subsequent payments by electronic funds transfer.

In an effort to streamline the handling of these large payments, the San Bernardino County Auditor-Controller/Treasurer/Tax Collector is requiring tax paying entities that make aggregate (total for the year) payments in the amount of \$50,000 or more to make all future payments electronically.

You can use our website at www.mytaxcollector.com to initiate an electronic payment by submitting a payment file and choosing to pay by electronic check, credit card, or by wire transfer. Wire instructions are included in this document.

Click 'Tax Collector' in the left navigation pane and then click 'Bulk Tax Payments' to get started.

Accepted File Formats

We currently accept payment files submitted in Microsoft Excel spreadsheet format. See details on the next page.



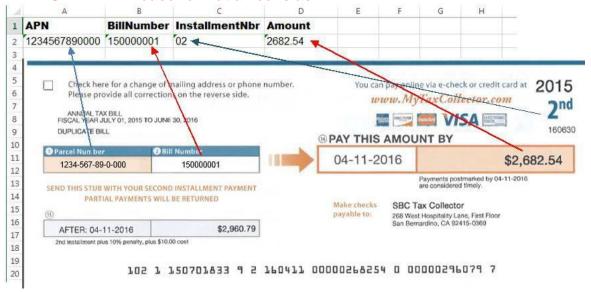
Microsoft Excel Spreadsheet Format

| Column | Header | Description | Req'd | Notes |
|--------|----------------|-----------------------------|-------|---|
| А | APN | Assessor's Parcel Number | YES | 13 Digit Parcel Number |
| В | BillNumber | Bill Number | YES | 9 Digit Bill Number or 'R' if Paying a Defaulted Secured Bill |
| С | InstallmentNbr | Installment Number | YES | '01' for First Installment '02' for Second Installment 'R' for Defaulted Secured Bill |
| D | Amount | Amount to be Paid | YES | |

Note: All payments on Unsecured bills (current and defaulted) should include the Bill Number and Installment Number.

Sample:

** IMPORTANT: Please format all cells as TEXT **



Payment Record Examples

| 1 | APN | BillNumber | InstallmentNbr | Amount | |
|---|---------------|------------|----------------|---------|-------------------------------------|
| 2 | 1234567890000 | 150000001 | 01 | 2682.58 | < CURRENT SECURED (1st Installment) |
| 3 | 1234567890000 | 150000001 | 02 | 2682.54 | < CURRENT SECURED (2nd Installment) |
| 4 | 1234567890000 | 150000002 | 01 | 123.45 | < UNSECURED BILL |
| 5 | 1234567890000 | R | R | 6789.1 | < DEFAULTED SECURED PAYMENT |



Additional Information

The system will import your file and will provide detail to you on any records where the bill has already been paid, if the parcel number or bill number combination is not valid or if there are other issues with a record. If there are errors with your file, you can make corrections and re-submit for validation.

Upon submitting the file, our system will obtain the dollar amounts for each item you are importing for payment. The preview screen will enable you to review each item and you can omit items from being added to the cart if you decide not to make a particular payment.

Questions concerning payment files should be sent to TCAccounting@sbcountyatc.gov

FOR TRANSACTIONS TO THE COUNTY OF SAN BERNARDINO VIA ACH OR WIRE:

Beneficiary Bank: Wells Fargo Bank, N.A.
Bank Location: Los Angeles, CA

ACH/EFT/Dom. Wire Routing Number: 121000248

For International Transfers Only: International SWIFT BIC WFBIUS6S

Beneficiary Account Number: 4662552868

Account Name: County of San Bernardino, Treasurer

Type of Account: Checking
Bank Representative Contact: Andrea Boquet

PLEASE NOTE

- No direct deposit into our account is allowed. You must process a wire transfer as certified funds.
- You must complete the attached information and return by email (<u>TCAccounting@sbcountyatc.gov</u>) or fax (909-890-5878) for any wire transfer.

PLEASE FILL IN THE REQUIRED INFORMATION BELOW AND RETURN BY EMAIL (<u>TCAccounting@sbcountyatc.gov</u>) OR FAX (909-890-5878).

| To: | Accounting | From: |
|--------|---------------|--------|
| Dept: | Tax Collector | Dept: |
| Phone: | | Phone: |
| | | |
| Fax #: | 909-890-5878 | Fax #: |

REQUIREMENTS TO WIRE

- 1. Payment reference number or at least one assessor parcel number contained within the payment file:
- 2. Amount to be wired and the date of wiring:
- 3. Name and address for refunds or correspondence, if any: