



## Confirmation of Banking Information Direct Deposit/Pre-Authorized Debit

Member Name: \_\_\_\_\_

Member Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Transit Number	Institution Number	Account Number								
3 3 3 7 3	8 3 9	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>								

Please accept this document as my authorization to set up new direct deposit/pre-authorized transaction for the following:

### Pre-Authorized Payment

Policy/Account #: \_\_\_\_\_

Payment Frequency: \_\_\_\_\_

Payment Amount: \_\_\_\_\_

Next Payment Date: \_\_\_\_\_

Direct Deposit

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\* To set up Government Direct Deposits, please complete the appropriate Government of Canada forms. Please refer to The Canada Customs and Revenue Agency website at <http://www.cra-arc.gc.ca>