Direct Deposit – Pre-authorized credit Form

Direct Deposit Authorization

To have your cheque deposited directly to your bank or other financial institution, please complete the authorization and details below and return to *ATTN: Payroll Dept.*

Name:	Signature:
Address:	
<u>City/Province:</u>	Postal Code:
Please deposit the	payable to me/us directly to my/our account (details below). y/pension, etc.)
Details of the account to w	hich payments are to be deposited:
Bank or Financial Institut	ion Name:
Address of branch:	
City/Prov:	Postal Code:
Direct routing number:	Account Number:
Institution No.	Branch Transit No:

Please attach a sample cheque marked "VOID"

Unit # 15, 6624 Centre Street SE, Calgary, AB T2H 0C6 Phone: (403) 264-9000 Fax: (403) 261-4766