DIRECT DEPOSIT AUTHORIZATION

ame:	
ddress:	
'ity. Province. Posts	ll Code:
ity, i Tovince, i osta	
	noa-
ACCIPILITY	
COTY, PHONESE POR	TA.COCH STE
OFFICE OF	100 DOLLARS (1) CONTRACTOR
I Co	nada Trust
220 LON	DUNDAS ST. IDON, ONTABLE NGA 4S4
MENO	*
1.0041	:12345-004: 1234-1234567*
	Designation number
Cheque	* Transit Financial Account (Branch) Institution number
	number number
	 Your branch number is the first 4 digits of this 5 digit sequence.
Jame of Bank:	
Address of Bank:	

Attach a voided check for each bank account to which funds should be deposited (if necessary)

Account #: _____

Signature:

Date. _____