



Tzeachten First Nation

Direct Deposit Authorization

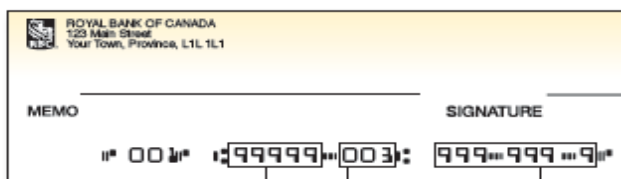


Full Name:	
Address:	
Address:	
Telephone:	
Email Address:	

Direct Deposit Authorization Transit Information:

Look at the bottom of your personal cheque to find this information

I've provided my banking information OR I've attached a void cheque



Transit #	Institution #	Account #
_ _ _ _	0 0 3	_ _ _ _ _ _ _

Complete the account information below or attach a VOID Cheque from your bank

Transit		Institution:		Account:	
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Please accept this document as my authorization to set up a new Direct Deposit for EFT Payments:

_____ Applicant's Signature	_____ Date
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Mail or Email Notice: Mail Notice Email Notice

Date modified: March 6, 2018

Please submit completed forms to:

ap@tzeachten.ca

or

Attn: Tzeachten Finance Department

45855 Promontory Road

Chilliwack, B.C. V2R 0H3