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SECTION A – TO START, CHANGE OR WITHDRAW FROM DIRECT DEPOSIT								
Check (√) one box	Check ($\sqrt{\ }$) one box							
_	Deposit ormation on Direct Deposit From Direct Deposit							
SECTION B - INFORMA	ATION ABOUT YOU							
First Name and Initi	al	Last Name						
Mailing Address	_	City						
Province	Postal Code							
SECTION C - DIRECT I	DEPOSIT INFORMATION							
To sign up for or cha	ange direct deposit information, cho	pose one of the following methods.						
	Note – The Provincial Services Branch provides this service free of charge. However, you should contact your financial institution and inquire about any fees they may charge.							
front of the blan deposit.	 Attach a personalized cheque from your bank account to this form. Write "VOID" across the front of the blank cheque. We will use the financial information on the cheque to set up direct deposit. 							
OR • If you don't have	e a cheque, have your financial insti	tution complete the blocks below.						
Branch Number	Institution Number	Financial Institution's Stamp						
Account Number								
SECTION D – CLIENT AUTHORIZATION								
in Section C. I agree to my financial institution, b days, after the receipt of have notified, in writing, understand this is a vol	notify, in writing, the branch at the stranch or bank account number and for notice, to implement a change. The branch at the address indicate	my benefit payments into the bank account address indicated below, of any changes to I allow the branch a minimum of 10 business he direct deposit service will continue until I ed below to withdraw from direct deposit. I anch has the right to convert this payment						
Signaturo		Data						