

Request to Change Automatic Payroll Deposit Information

To make sure that your pay is deposited into the correct account, please complete this form and submit it to your employer's Payroll Department.

Instructions: Please complete and submit this form to your employer's Payroll Department.

My Contact Information

Employee Number (if required) _____
First Name _____ Last Name _____

Mailing Address (Number, Street, Apt., P.O. Box, R.R.) _____

City _____ Province _____ Postal Code _____

Work telephone number _____ Home telephone number _____

My New Bank Information

Branch Number _____ Institution Number _____ Account Number _____

OR

I've attached a cheque from my bank account, marked "VOID".

I hereby authorize my employer, _____, to deposit, until further notice, my payroll into the account indicated above, by means of direct deposit.

Signature _____ Date _____