Electronic Funds Transfer Form (EFT)

Listuguj
MI'GMAQ GOVERNMENT

(1) EFT Action Requested (check one)

START ☐ CHANGE ☐ CANCEL ☐

IMPORTANT: For a start or change request, attach a voided cheque or Electronic Payment information on company letterhead with completed form.

(2) Vendor Information

VENDOR NAME:

VENDOR ADDRESS:

(3) Vendor Contact Information

PRIMARY EFT CONTACT NAME:

E-MAIL ADDRESS: (MANDATORY)

PHONE NUMBER:

FAX NUMBER:

(4) Financial Institution Information

FINANCIAL INSTITUTION NAME:

ADDRESS:

PHONE NUMBER:

TRANSIT NUMBER:

ACCOUNT NUMBER:

ACCOUNT TYPE: (CHECK ONE) CHEQUING ☐ SAVINGS ☐

Signing Authorization

NAME AND TITLE (print):	SIGNATURE:
DATE:	DATE:

Signing Authorization *(if required)*

NAME AND TITLE (print):	SIGNATURE:
DATE:	DATE:

(6) ***For Listuguj Mig'maq Government Use***

VENDOR ID #:

VERIFICATION SIGNATURE AND DATE:

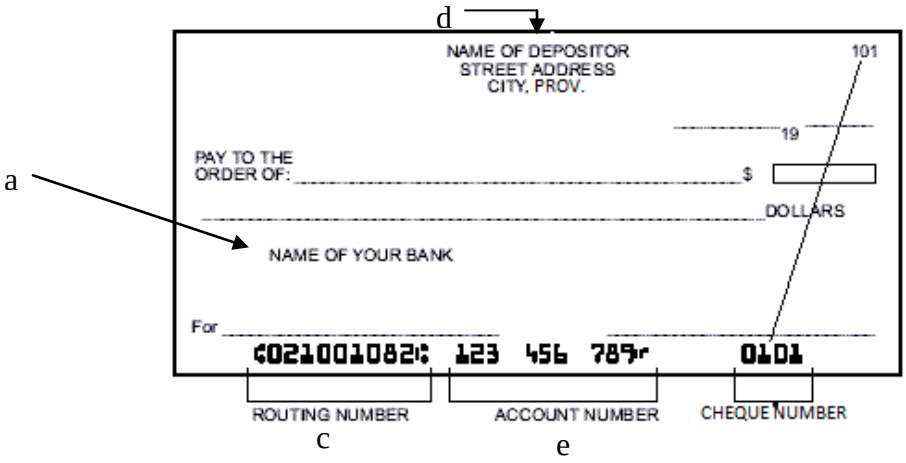
Instructions for Completing 'Request for Vendor EFT Information' Form

1. EFT Action Requested Section: Place an "X" in the appropriate box to indicate if you are requesting to start EFT, change your current EFT information on file with the Listuguj Mi'gmaq Government, or cancel (discontinue) receiving payments via EFT.
   IMPORTANT: If you are submitting a start or change request, you MUST include a voided cheque or EFT information along with the completed form or your request will not be processed.

2. Vendor Information Section: Provide the Vendor name and address.

3. Vendor Contact Information: Provide the name, e-mail, phone and fax number of the individual who will be the primary EFT contact.

4. Financial Institution Information: The information provided by the vendor in this section will determine to which financial institution and account the Listuguj Mi'gmaq Government directs payments. The cheque image below should aid in gathering financial information to complete this form.
   a) Financial Institution Name – Provide the name of the financial institution to which payments are to be directed.
   b) Address – Provide the full address of the financial institution to which payments are to be directed.
   c) Routing Transit Number – A bank identifier, always found at the bottom of your check. This number is 9 digits long.
   d) Account Title – Provide the depositor's name (account holder's name) on the account to which payments are to be directed.
   e) Account Number – Your bank account number at your financial institution. There is no fixed number of digits, account numbers vary in length from bank to bank.
   f) Account Type - Place an "X" in the appropriate box to indicate a chequing or savings account.



5. Vendor Authorization: Proper authorization must be provided by an authorized official in order for the Listuguj Mi'gmaq Government to process the EFT Request form. The authorized official should sign and date the form, as well provide his\her title.

6. ***For Listuguj Mi'gmaq Government Use*** Section: This section will be completed by the Listuguj Mi'gmaq Government. This information aids us in vendor identification within the payables system.

Mail the completed EFT form along with a voided cheque to:
The City of Dawson Creek, Finance Department, Attn: Melina Mitchell, 17 Riverside West, Listuguj, Qc, G0C 2R0
You can also send via fax to (418) 788-3046 or email melina.mitchell@listuguj.ca