



**CREDIT UNION**

ÉVANGÉLINE-CENTRAL

# DIRECT DEPOSIT ENROLLMENT FORM

37 Mill Road  
Wellington, PE  
902-854-2595

873 Canada Road  
Tyne Valley, PE  
902-831-2900

512 Main Street  
O'Leary, PE  
902-859-2266

**PART 1: TO BE COMPLETED BY PAYEE**

COMPANY (PAYOR) NAME		REFERENCE NO.
		<input type="checkbox"/> NEW ENROLLMENT <input type="checkbox"/> ADVICE OF CHANGE
COMPANY (PAYOR) MAILING ADDRESS		
	TELEPHONE	

**PART 2: TO BE COMPLETED BY FINANCIAL INSTITUTION FOR NEW ENROLLMENT OR CHANGE OF ACCOUNT INFORMATION**

FINANCIAL INSTITUTION NAME AND ADDRESS	DIRECT DEPOSIT ROUTING NUMBER		
	TRANSIT NUMBER <b>79053</b>	INST. NO <b>839</b>	ACCOUNT NUMBER
	ACCOUNT NAME		
	ACCOUNT ADDRESS	TELEPHONE	

**PAYEE AUTHORIZATION**

I/We hereby authorize the above named company (payor) to use a direct deposit system, to make deposit payments directly to the account described above, until notice in writing to stop the direct deposits and to cancel this authorization is received by the company.

DATE \_\_\_\_\_

\_\_\_\_\_  
\*SIGNATURE OF ACCOUNT HOLDER

DATE \_\_\_\_\_

\_\_\_\_\_  
\*SIGNATURE OF JOINT ACCOUNT HOLDER

\*This authorization must be signed in accordance with the signing authority required on the account.

ALL INFORMATION SUBMITTED WILL BE TREATED AS PRIVATE AND CONFIDENTIAL