Direct Deposit Request Form

COMPANY INFORMATION:

Efficiency Manitoba's preferred method of payment is by Direct Deposit. We strongly encourage you to participate in as a means to reduce the use of paper products and experience a more efficient payment method. Please complete all of the requested fields. If you have any questions, please email AccountsPayable@efficiencyMB.ca.

Company Name (maximum 6	60 characters):	
Company Name on Bank Acc	ount (if different from above):	
Company Address:		
		Postal Code:
	sting Bank Account Information, Effe	active Date:
BANK ACCOUNT INFORM	ATION: (Attach a copy of a void c	heque along with this completed form.)
Name of Financial Institution	:	
Address of Financial Instituti	on:	
Financial Institution Number	(3 digits):	Transit Number (5 digits):
Account Number:		
REMITTANCE INFORMATI	ON - FOR NOTICE OF PAYMENT:	
Please provide an email add	ress to receive your payment details.	(maximum 40 characters)
Email Address:		
authority to provide the above info submitted to Efficiency Manitoba vi	mation on behalf of the payee. The payee wil a another "Direct Deposit Request Form" I ack y changes may take several weeks to process f	leposit into the account provided. As applicable, I have the I ensure that any change to banking information is promptly knowledge that it is my responsibility to provide correct from the receipt of the form. Efficiency Manitoba has the right
Name of Authorized Officer:		
Title of Authorized Officer: _		Phone:
Signature:		Date:



(YYYY-MM-DD)