

Electronic Funds Transfer Form

Click Here to fill out this form for free.

Direct Deposit Payments

Payments are deposited directly into your bank account through our electronic payment program.

1. Payment Information

Program Name:
Address:
Email:
Account Holder:
Financial Institution:
nstitution Number (3 digits)
Branch Transit Number (5 digits)
Account Number* (7 digits)
*For Credit Union Banks, account number may be more then 7 digits
2. Please attach a void cheque.
To ensure the accuracy of your account information, please attach a void cheque.
By signing below, I hereby confirm that I am the authorized person to provide above program's bank account information, and authorize Alberta Resource Centre for Quality Enhancement to directly deposit payment of invoices and/or support to the account stated above.
Signature Printed Name

3. Once Completed send this form to <u>finance@arcqe.ca</u>

This account will be used for all payments you receive from **ARCQE**; for all multiple programs you might invoice to.

The authorization will remain until *ARCQE* receives your written authorization and verbal confirmation to terminate or change your direct deposit information.

Your statement of account from your financial institution will reference the payments from ARCQE.