

File: 1630-20

To our Vendors and Suppliers:

Re: Direct Deposit Authorization for Electronic Funds Transfer

The Comox Valley Regional District (CVRD) uses electronic funds transfers as the preferred method for paying our vendors and suppliers.

If you have not already provided your direct deposit information, please complete and return the Direct Deposit Authorization for Electronic Funds Transfer (EFT) form on the back of this letter, along with a void cheque to:

Accounts Payable
Comox Valley Regional District
770 Harmston Avenue
Courtenay BC V9N 0G8

You may also fax this form to (250) 334-4358, or send via email to ap@comoxvalleyrd.ca.

If you have already sent us a signed copy of the EFT application and financial information, thank you, and please disregard this request.

For any questions regarding this form, please contact CVRD Accounts Payable at 250-334-6034 or by email at ap@comoxvalleyrd.ca.

Sincerely,

L. Wiwcharuk

Lucy Wiwcharuk, CPA, CMA
Chief Financial Officer

Use this form to:
☐ Start direct deposit payments

Or

☐ Change information previously submitted

Effective date:

Contact Information

Vendor number (if known):

Name of company or person to receive payment:

Street Address:

Phone:

(enter number without dashes)

Contact person:

Fax:

Title or position:

E-mail

Confirmation of Deposits

Your bank statement will show payment from Comox Valley Regional District. We will send you an e-mail confirmation when we deposit a payment to your account.

E-mail address for confirmation of deposit:

Bank Account Information for Deposits

Please attach a blank cheque with your bank information on it.

Write void across the front.

Or

Name of bank or other financial institution:

Address or branch where account is held:

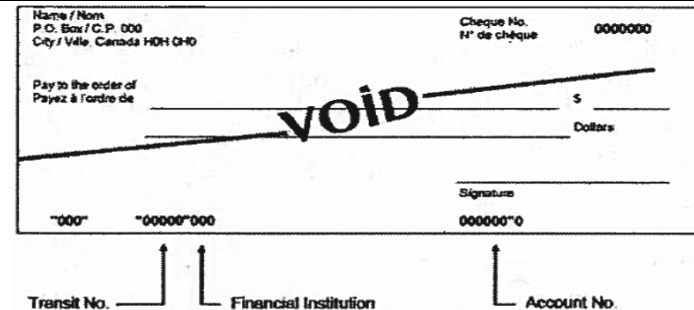
Transit No.:

Institution No.:

Account

No.: Teller

Stamp:



Name / Nom
 P.O. Box / C.P. 000
 City / Ville, Canada H0H 0H0

Cheque No.
 N° de chèque 00000000

Pay to the order of
 Payez à l'ordre de

\$ Dollars

Signature

"000" "000000"000 000000"0

Transit No. Financial Institution Account No.

Authorized Electronic Funds Payments:

I authorize Comox Valley Regional District (CVRD) to deposit, by electronic fund transfer, payments owed to me if necessary, to debit entries and adjustments for amounts deposited electronically in error. The CVRD will deposit the payments in the bank account designated above. I recognize that I am responsible for payment errors that result from incomplete or inaccurate information on this form.

Authorized signature:

Printed name:

Title:

Date:

Fax, scan and email or mail completed form and voided cheque to:
Attention: Finance Department and,

Fax: 250-334-4358.

Email: ap@comoxvalleyrd.ca

 Comox Valley Regional District
 770 Harmston Avenue, Courtenay, BC V9N 0G8

Questions?

Call (250) 334-6000 or

E-mail: administration@comoxvalleyrd.ca