



PEERLESS TROUT FIRST NATION # 478

Box 128
Peerless Lake, AB
T0G 2W0

Phone: 1-780-869-3985
Fax: 780-869-3983

Date: _____

I _____ instructs Peerless Trout First Nation to deposit my payroll into _____'s bank account.

I will not hold Peerless Trout First Nation responsible for any loss of funds due to the above instructions.

This agreement will remain in effect until Peerless Trout First Nation receives a written notice of cancellation from me, or until I submit a new direct deposit form to the finance department.

Name on Account: (Please Print) _____

Name of Financial Institution: _____

Address of Financial Institution: _____

Branch/Transit Number (5 digits): _____

Institution/ Bank Number (3 digits): _____

Account Number: _____

** Note: Please include all your account number including any sub numbers **

Signature: _____

Employee

Signature: _____

Bank Account holder