



Canada Trust

New Direct Deposit/Pre-authorized Transactions

Customer name: SYED FARHAN ABSAR

TDCT Account No. 18282 004 06336211420
Transit No. Inst. No. Account No.

This form is used for new direct deposits/pre-authorized transactions only. Please take this form to your billing/deposit company.

Billing/deposit company information:

Company name Miller Thompson Ltd. Phone (416) 250-5800
Street 4100 Yonge Street HARRIS, SHEAFFER LLP IN TRUST Fax (416) 250-5300
City Toronto Postal code M2P 2B5
SUITE 610.

Please accept this document as my authorization to set up new direct deposit/pre-authorized transactions for the following:
(one form for each change)

1. Preauthorized payment
Please indicate which apply:

- ☐ Insurance ☐ Mortgage payment
☐ Utility ☐ Lease
☐ Membership ☒ Other
☐ Loan payment

2. Direct deposits
Please indicate which apply:

- ☐ RIF/LIF/LRIF ☐ Annuity
☐ Benefit/Pension ☐ Other

3. Payroll deposit

Policy/account # _____
Payment frequency (monthly, weekly, daily) _____
Payment amount \$ 5000.
Next payment date (dd/mm/yyyy) _____

All authorized signatures required

Customer or Signing Officer signature(s) 28/10/2011
Date (dd/mm/yyyy)

Customer or Signing Officer signature(s) _____
Date (dd/mm/yyyy)

Note: To set up Government Direct Deposits, please complete the appropriate Government of Canada forms. The branch can provide you with a 'Direct Deposit Enrolment Request' form (#520745) or you can refer to the Canada Customs and Revenue Agency website (www.ccr-a-adrc.gc.ca).