



# Customer Account Information for Direct Deposit or Pre-Authorization Payment

**TO BE USED ONLY IN PLACE OF VOIDED CHEQUE**

## Customer Information

Name

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Address

City

Province

Postal Code

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## Banking Information

Name of Financial Institution

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Branch Address

City

Province

Postal Code

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Transit Number

Institution Number

Account Number

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Customer Signature

Date

## Customer Instructions

1. This form provides account information in place of a voided cheque and is used when arranging pre-authorized payments or direct deposits.
2. Upon completion, submit the form to the Diocesan Office, attention Tammy Cummins, 1340 Cathedral Lane, Halifax, NS B3H 2Z1 or email to [tcummins@nspeidiocese.ca](mailto:tcummins@nspeidiocese.ca)

*affix  
financial institution  
stamp*

Signature \_\_\_\_\_