
General Information:

Last Name

First Name & Initial

Address

City

Province

Postal Code

Contact Information:

Home

Office

Cell

Agent Request for Direct Deposit (EFT):

Agent Code:

Initial Request

Change in Banking Information

Cancellation

It is understood that:

- * The Company reserves the right to pay the agent's compensation exceptionally by cheque.
- * The agent is responsible for informing the Company of any changes to banking information.
- * Funds are not to be released on any file until the appropriate compliance documents have been received.
- * The Company reserves the right to terminate this direct deposit at its discretion.

Agent Signature: _____ Date: _____

Authorized Signatory: _____ Date: _____
