

ELECTRONIC FUND TRANSFER (EFT) INFORMATION

Supplier Number (Northback info only) _____

Supplier Name: _____

Address: _____

E-mail address (EFT requirement) _____

Contact & Telephone Number (for questions) _____

Interest in EFT?

Yes No

If yes, please provide the following:

A copy of your void cheque is mandatory for verification purposes.Legal name of the bank account:

Institution (3-digit number): _____

Transit (5-digit number): _____

Account # _____

If your banking information changes, it is imperative the change is communicated to our Finance Department.

Please return this form to: accounts.payables@northback.ca