



Payroll Direct Deposit Form

*** All fields on this form are mandatory ***

Account holder name (Last, First): _____

Employee Number or SIN: _____

Faculty/Department: _____

email address: _____

Phone: _____

Account Information: Please enter your bank account information below

- If you have a non-chequing account, please obtain the transit, branch, and account numbers from your bank
Note: submitting incorrect information could result in your payment going astray.
- If you have a chequing account, you can obtain the numbers from a cheque (see below), or attach the cheque overtop of the sample

Chequing

Savings

Your Name 1234 Your Street Yourtown, BC A1A 2B2	<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td> </tr> </table>							D	D	M	M	Y	Y
D	D	M	M	Y	Y								
Pay to the order of _____ \$ _____ /100 DOLLARS													
YOUR BANK NAME													
MEMO _____													
<p style="text-align: center;"> "001" : 12345 "003: 123" 45678 </p>													

<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table> Transit (Branch)									<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td> </tr> </table> Bank					<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table> Account Number																				

Banking Institution: _____

Branch Address: _____

I authorize the University of British Columbia to deposit my pay as noted above

Signature

Date