



Change Form

Banking Change Form

Plan Sponsor Name

Member First and Last Name

Social Insurance Number

Sample Cheque:

Your Name		00408	
555 Main Street		_____, 2011	
Victoria, BC V1A 2B3			
Pay to the Order of _____		\$ _____	
		/100 DOLLARS	
Your Bank			
111 Main Street, Victoria, BC V1A 2B3			
408	12340	001	5678910
Cheque number	transit number	Institution/Bank code	Account number
			Account number

Effective Date

Bank Name

Branch Address

Institution #

Branch/Transit #

Account #

Member Signature

Date

Please print this form for signing and return to your Human Resource Department or Payroll Department