

## ELECTRONIC PAYMENT REQUEST

Please fill out this form electronically. You will need Adobe Acrobat Reader, which can be downloaded free of charge from Adobe.com. If you are unable to download the free program, please contact us. Completed forms are submitted to: [finance@mfa.bc.ca](mailto:finance@mfa.bc.ca).

Organization (Payor) Legal Name			
MFA Program for Payment	<b>Pooled High Interest Savings Account</b>		
Borrowing Reference	<b>Additional Banking Token(s)</b>	CIBC <input type="checkbox"/>	

The payment detailed below will be processed from the bank account information currently on file with the MFA:

Payment Amount	\$	= Number of tokens X \$30 per token
<i>*Please note payment will be taken at the time payment request received</i>		

Bank Name			
Institution Number			
Transit Number	Account Number		

### Authorization

The undersigned are current signing officers on file with Municipal Finance Authority:  
*Please note these names may differ from your authorized PHISA Program signers.*

Signature	Signature
Print Name	Print Name
Title	Title

For MFA Use Only	
<input type="checkbox"/>	Reviewed by:
<input type="checkbox"/>	EFT #:
<input type="checkbox"/>	EFT Approved by: