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Toronto, Ontario
M5C 1S8
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DIRECT DEPOSIT AUTHORIZATION

Employee Name: _____ SIN:_____

Employee Address: _____

Every effort is made to ensure that net pay is deposited into the account specified on the actual payday. However, employees must understand that there are possible delays in processing direct deposits.

The Accounting Department must be notified immediately of any changes to bank information.

Name of Bank: _____

Transit # _____ Institution # _____ Account # _____

Please atttach a COPY of a VOID CHEQUE

I understand that my direct deposit cannot be guaranteed to be in my account on the actual payday due to input errors, bank holidays or time delays between our bank and other financial institutions.

I hereby authorize Kent Legal to deposit my net pay directly into my account and to initiate, if necessary, debit entries and adjustments to correct any entries made in error in my account. This authorization will remain in force until I revoke it by giving written notice to the Accounting Department.

_____ _____
Employee Signature Date