P. O. Box 8000, Boyle, Alberta, Canada T0A 0M0
Telephone: (780) 525-8000 Facsimile: (780) 525-8423

EFT (CDN) AUTHORIZATION FORM

Vendor Information

Company /or Name:_____

Address:_____

City:_____ Province:_____ Phone _____

Postal Code:_____

Bank Account Information

Bank Name:_____ Phone Number: _____

Bank Address:_____

City:_____ Province:_____ Postal Code:_____

Bank Number: (3 digits) _____

Transit or Branch Number: (5 digits) _____

Bank Account number: _____

Please attach a void cheque or pre-printed bank deposit slip.

Remittance Instructions

Email the Direct Deposit remittance advice to: Email Address: _____

Email reports and statements to: Email Address: _____

Authorization Agreement

I hereby authorize **Alberta - Pacific Forest Industries Inc.** to initiate automatic deposits to my account at the financial institution named above.

Further, I agree not to hold **Alberta - Pacific Forest Industries Inc.** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until **Alberta - Pacific Forest Industries Inc.** receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Accounts Payable Department.

All information will be used only for the purpose of facilitating electronic funds transfer and will be kept confidential and secure.

Authorized Signature:_____ Date: _____

Printed: _____ Title: _____

Please return completed form and copy of void cheque to the above address ATTENTION ACCOUNTS PAYABLE or email

accounts.payable@alpac.ca.