# IMPORTANT NOTICE

## **Electronic Funds Transfer**

**To: Supplier Accounts Receivable** 

**RE: Electric Funds Transfer** 

Electronic Fund Transfer is required for supplier invoice payments at BGIS Global Integrated Solutions. Payment of invoices by direct deposit will benefit your organization by eliminating your time spent depositing payments, eliminating the possibility of delivery disruptions or lost mailings, and the threat of fraud, lost or stolen cheques.

In order to take advantage of our direct deposit program, we ask that you please complete the attached form and return it to us with a "void cheque" sample.

If you have any questions or comments regarding the EFT process, please e-mail Payment.Inquiry@BGIS.com

Thank you on behalf of BGIS Global Integrated Solutions for your continued support.

Sincerely,

Jacqueline Ho
Director Financial Shared Services
BGIS



# **Electronic Funds Transfer**

## **Consent Form**

I hereby consent and give Brookfield Integrated Solutions the authorization to use the attached banking information to process an electronic payment directly to my organization's bank account through the use of Electronic Funds Transfer. I understand the information will be kept confidential and not used for any other purpose.

I also agree to update Brookfield Integrated Solutions should any of the banking information below change.

Instructions: Please complete Part One and Part Two.

Part One – F	Jam	ittance	ını	crmai	non
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Supplier/ Name and address	
Supplier/Contact Name	Phone No. & Ext
Print Name of Signing Authority	Title
Phone number and extension	
Authorized Signature	

Please provide an email address below to receive your payment details. It is highly recommended that you provide a generic contact to ensure that the information is received.

### Part Two – Payment information

To ensure the accuracy of complete the following:	our account information, you must attach/fax a void cheque and
Name of Financial Institution	
Address of Financial Institution	

#### BANK ACCOUNT INFORMATION:

#### **CAD\$** Account

(4 digits) (5 digits)					Account Number (Maximum 12 digits)														

## Please send your completed form and "Void Cheque" to

BGIS Global Integrated Solutions Financial Shared Services Department PO Box 4800 4175 14<sup>th</sup> Avenue Markham, ON L3R 4E6