

# Direct Deposit Notification

To: \_\_\_\_\_

Address: \_\_\_\_\_

Please accept this notification to re-direct the following deposit to the account identified below effective:

Fold (Form 701)

Start Date

- Pay cheque
- Government payments
- Dividend payments
- Other payments

Copy the required information or attach a "VOID" Cheque.

\_\_\_\_\_  
Employee Number


\_\_\_\_\_  
Social Insurance Number

\_\_\_\_\_  
Shareholder Certificate Number

\_\_\_\_\_  
Details/Number

Thank You,

\_\_\_\_\_  
Signature of Account Holder

Your name:	WESTBANK FIRST NATION	
Address:	515 HIGHWAY 97 S SUITE 301 KELOWNA V1Z3J2	
	-----VOID-----	\$
		(if applicable)
<small>BMO  Bank of Montreal</small>		
Your Branch address:	_____	
	_____	_____
	07790	001 1015-568
Transit Number	Institution Number	Account Number

**Bank of Montreal**  
294 Bernard Avenue  
Kelowna, British Columbia  
V1Y 0Z1  
*[Signature]*