



# DIRECT DEPOSIT AUTHORIZATION - BUSINESS ACCOUNTS

MTFX requires you to complete a direct deposit authorization for accounts in which the funds are to be deposited. MTFX will initiate a deposit to the account designated by you for the settlement of funds.

- Please ensure that you complete this deposit authorization in full, in particular the name of the financial institution, your transit number, account number and the amount to be deposited.
- Please complete and return this direct deposit authorization form to your Account Executive at MTFX for processing.

## THE UNDERSIGNED ACKNOWLEDGES AND AGREES TO THE FOLLOWING:

1. The undersigned hereby authorizes MTFX to deposit funds to the undersigned's account(s) which are maintained at Canadian Financial Institutions.
2. The undersigned is solely responsible of the completion of the direct deposit authorization form provided to MTFX in connection with any and all deposits made by MTFX on behalf of the undersigned.
3. MTFX is entitled to and shall rely solely on the direct deposit authorization form provided by the undersigned. MTFX is not obligated to make, nor will it make any independent inquiries to determine the accuracy or completeness of the information provided on this form.
4. MTFX is neither responsible nor liable for any errors made on the part of the financial institution at which such deposit(s) are instructed to be made.

### Client information

Client name

Street address

City  Province

Postal code

Phone

Fax

Cell

### Banking information

Bank name

Bank address

Transit number

CAD account number

USD account number

Other currency account

Currency type

## Please provide us a copy of a void cheque for the account in which the funds are to be deposited.

The undersigned must be an officer and an authorized signatory of the above bank account(s) and has read and understood the terms of this direct deposit authorization. The undersigned understands the limitation of services rendered by MTFX in connection with MTFX making deposits to the undersigned's account(s) from time to time.

Name

Date (MM/DD/YYYY)

Signature \_\_\_\_\_