



PROVINCIAL GOVERNMENT EMPLOYEES

Pre-Authorized Payment/Direct Deposit Form

Direct Deposit



Pre-Authorized Payment



Account Holder's Name

Phone Number

Address

City

Province

Postal Code

I authorize this direct deposit/pre-authorized payment to be debited/credited using the following account information:

Branch Number	Institution Number	Account Number
30833	839	

Provincial Government Employees Credit Union

Name of Credit Union

1724 Granville St, Halifax, Nova Scotia, B3J1X5

Address

Effective Date:

Account Holder's Signature

Date