

SCOUTS CANADA GROUP FINANCIAL INFORMATION REQUEST FORM

Please fill out the below information and return the completed form along with a void cheque (which can also be scanned) to Tania Burns at <u>tania.burns@scouts.ca</u> or via fax to 613-224-3571. Forms can also be dropped off or mailed to:

Attn: Tania Burns Scouts Canada National Service Centre 1345 Baseline Road Ottawa, ON K2C 0A7

Please submit the form and void cheque.

GROUP INFORMATION			
Group Name:		Council:	
		Council	
Please provide the contact inf	ormation for the person who	o manages the Group's bank account.	
Group Contact:		Phone Number:	
Address:		Apt/Unit:	
Province:	Postal Code:	Email:	
BANK INFORMATION FOR I	DIRECT DEPOSIT		
Name of Account Holdor (Ac i	t appears on the bank staten	nent/cheques):	
Bank Name:		Branch Address:	
City:	Province:	Postal Code:	
Transit #:	Institution #:	Account #:	
Please also provide a copy o	of a void cheque with this j	form.	
Х			
Signature of Signing	; Officer No. 1	Please Print Name	Date
Х			
Signature of Signing Officer No. 2		Please Print Name	Date