

# GWICH'IN TRIBAL COUNCIL PAYMENT AUTHORIZATION FORM

MUST BE COMPLETED TO RECEIVE YOUR FUNDS.

**FORM B**

**How do you want to receive your payment ?** (please check off which one)

- I want my payment sent to me in the mail by cheque.
- I want my payment deposited into my bank account.

## IDENTIFICATION

First Name:	Middle Name or initial:	Last Name:
Mailing Address:		
City/ Town:	Territory/ Providence:	Postal Code:
Telephone:	Email Address (please print)	
Social Insurance Number:		

I authorize the Gwich'in Tribal Council to mail payment to my address indicated above, or to deposit into my bank account indicated below, the payment(s) entitled to me.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

We will not transfer any funds to your bank, until we receive a copy of a "voided" personal cheque; if you do not have personal cheques then you will need to have this form stamped by your bank institution for verification purposes.

## BANK ACCOUNT INFORMATION (do not fill in if you want a cheque sent to you)

Name of Account Holder:		
Name of Financial Institution:		
Bank Address:		
Institution Number: (3 digits)	Branch Number: (5 digits)	Account Number:
Financial Institution – Stamp here to verify account information		

Please fax completed (stamped) form to Gwich'in Tribal Council at 867-777-7919