Introduction:

A new input form has been designed to support the capture of key information from pensioner's wishing to enroll in the United States direct deposit. The following is a step by step procedure developed to guide the pensioner in the proper completion of the form.

Completion Instructions:

The United States Deposit Enrollment form is divided into three sections. They are:

- Part A Pensioner Identification Information,
- Part B Pension Program Identification; and
- Part C Identification of the Financial Institution.

<u>Part A - Pensioner Identification</u> Information:

Part A provides space for you to identify your name, address, mail code, and telephone number. The following is a step by step procedure.

Steps 1 and 2

Enter your surname and given name and initials in the boxes provided. One letter per box. Please use capital letters.

Please print clearly. Please keep the appropriate federal government department informed of any change to your mailing address. 1 Surname - Nom 2 Given name and initial(s) - Prénom et initiales 3 Address - Adresse State - État Zip Code - Code postal 4 Is this a new address? Nouvelle adresse? Yes Nouvelle adresse? Yes Nouvelle adresse? Veisiblement. Veuillez informer le ministère fédéral approprié de tout changement d'adresse.

Step 3

Enter your address information including the name of the city, country and zip code.

Step 4

Confirm if the address is new by entering \square in yes or no.

Step 5

Enter your area code and telephone number in the event that you need to be contacted to seek clarification on the information provided.

You have now completed Part A, Pensioner Identification Information.

Part B - Pension Program identification:

Part B provides a mechanism for you to specify the payments you want deposited directly into your US account. To enroll, check (\square) the appropriate box and include one of the following in the space provided: account number (your social insurance number), contract number, file number, pension number, or personal record identifier.

The department responsible for your pension program will use this to find your account and to issue the requested electronic payment.

Step 1

Check off the box(es) ☑ for the payment(s) you wish to receive by direct deposit.

Step 2

Enter the number associated to each type of payment you wish to receive.

You have now completed Part B, - Pension Program identification.

PART B - PARTIE B	
1 Check off the box(es) for the payment(s) you wish to receive by direct deposit.	Cochez la(les) case(s) de(s) paiement(s) que vous désirez recevoir par dépôt direct.
2 Enter the number associated to each type of payment you wish to receive.	Inscrivez le numéro associé à chaque type de paiement que vous désirez recevoir.
Service Canada	
Old Age Security (OAS) Sécurité de la vieillesse (SV)	International Agreements - OAS Accords internationaux - SV
Canada Pension Plan (CPP) Régime de pensions du Canada (RPC)	International Agreements - CPP Accords internationaux - RPC
Account No	· N° de compte
Human Resources and Skills Development Canada Ressources humaines et Développement des compétences Canada	
Canadian Government Annuities Rentes sur l'Etat	
Contract No N° du contrat	
Veterans Affairs Canada - Anciens Combattants Canada	
Veterans Affairs Pension or Award Pension ou indemnité d'invalidité des anciens combattants	
War Veterans Allowance Allocation aux anciens combattants	
Veterans Affairs Financial Be Les avantages financiers au	
File No	N° de dossier
Compensation - Prestations de ret	raite
Canadian Forces Pension Pension de retraite des Forc canadiennes	Public Service Superannuation Pension de retraite de la fonction publique
RCMP Pension Pension de retraite de la GR	Judges' Pension Pension des juges
Pension No N° de pension de retraite	
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Members of Parliament Retiring Allowances Allocations de retraite des députés	
Personal Record Identifier Code d'identification du dossier personnel	

Part C - Identification of the Financial Institution:

Part C provides specific fields for you to capture your direct deposit account information which includes the "transit data" such as the bank and branch and the account number to which the electronic payment is to be directed. For a US direct deposit it is also a requirement to identify the type of account as either a chequing or savings.

To enroll in Direct Deposit, attach a voided cheque (a blank personal cheque with "void" written on it). Be sure to sign at the 'X' below in box 8.

If you do not enclose a voided cheque, fill in boxes 1, 2, 3 and 4 below. Your financial institution should confirm this information by completing boxes 5, 6 and 7.

Step 1

Enter the Transit/ABA No. which represents the bank and branch. One letter or number per box please using capital letters where applicable.

Step 2

Enter your bank account number one number/character per box. Please use capitals for characters (if applicable).

Step 3

Enter the type of account by entering a check mark (☑) in either the chequing or savings box.

Step 4

Enter the name(s) of the account holder(s).

Step 5

Enter your bank, branch address and zip code

Step 6

Please obtain the signature of the financial institution official.

To enroll in Direct Deposit, attach Pour vo	
a voided cheque (a blank personal joignez cheque with "void" written on it). en blan Be sure to sign at the "X" below in box 8. assure indique case 8.	
fill in boxes 1, 2, 3 and 4 below. Your remplis- financial institution should confirm this ci-dessi information by completing boxes confirm	ne joignez pas de chèque annulé, sez les cases 1, 2, 3 et 4 ous. Votre institution financière doit ler cette information en remplissant es 5, 6 et 7.
Direct Deposit Routing No N° d'acheminem	ent du dépôt direct
Transit / ABA No N° de transit / ABA	
2 Account No N° de compte	
	\mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I}
Type of account Chequing or Cheques ou	Savings Épargne
	ode - Nom, adresse et code postal institution financière
Signature of financial institution official Signature du représentant de l'institution financière	ay be used - Cachet de l'institution accepté) Date e Y-A M D-J
3 Signature of financial institution official	Date
3 Signature of financial institution official	Date e Y-A M D-J
Signature of financial institution official Signature du représentant de l'institution financière	Date e Y-A M D-J
Signature of financial institution official Signature du représentant de l'institution financière signature du représentant de l'institution - N° de téléph 7 Telephone no. of financial institution - N° de téléph 1, as the person entitled to receive the above-mentioned payment(s) and in lieu of my receiving a Receiver General deque for it, hereby authorize the Receiver General for Canada to convert Canadian dollars to U.S. dollars and to deposit, until further notice, the payment(s) described above into my account noted herein by means of Direct Deposit. I hereby agree to accept the exchange rate applied to the payment(s). I also agree that neither the Canadian government nor its agents shall be liable to myself or any third parity for any special, consequential or incidenta damages arising from delay.	Date e Y-A M D-J

Step 7

Enter your bank area code and telephone number, in the event that they need to be contacted for clarification on the information provided.

<u>Step 8</u>

The beneficiary must sign and date the bottom of the enrollment form. If the individual completing this form is a guardian / relative acting on behalf of the beneficiary this enrollment information will not be considered valid without the beneficiary's signature.

<u>Note:</u> For additional information, call 1 800 593-1666 between the hours of 8 a.m. and 8 p.m., Eastern time.

Note: The information you provide is required and collected under the authority of the Government of Canada or its agent for the purpose of enrollment in a direct deposit service. The information provided is protected under the Canadian Privacy Act and my be accessed through your program department using the Personal Information Bank number PWGSC PPU 040

The first direct deposit may take approximately three months after receipt of your completed enrollment form.