

**1. TYPE OF REQUEST**
 CREATION       MODIFICATION

**2. SUPPLIER INFORMATION**

Supplier name \_\_\_\_\_

 Address \_\_\_\_\_ Postal code 

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No.      Street      Apt.      City      Province

 Tel. no. \_\_\_\_\_  
(XXX XXX-XXXX)

 GST/HST no. \_\_\_\_\_ PST account no. \_\_\_\_\_  
(XXXXXXXXXXRTXXXX) (include all numbers and letters)

 Email address where we will send payment confirmation emails:  
\_\_\_\_\_

**3. PAYMENT INFORMATION**
**1. Preferred Option** (payment upon receipt):

 Are you registered in *US Bank's Payment Plus* virtual credit card payment program?  Yes  No

**Alternative Option:**
**2. Direct deposit is available per the conditions below** (please select):

	1 %/10 days	Net 60 days
Direct deposit		

 Attach a **void cheque** or equivalent proof from your financial institution.

**4. AUTHORIZATION**
 The supplier authorizes iA Financial Group (and its subsidiaries) to make payments based on the method and term of payment selected above. The supplier is responsible for informing iA Financial Group of any changes with respect to the bank account where the method of payment is direct deposit.

First name \_\_\_\_\_ Last name \_\_\_\_\_ Title \_\_\_\_\_

 Tel. no. \_\_\_\_\_ Email address \_\_\_\_\_  
(XXX XXX-XXXX)

 Date 

Y	M	D
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**5. TRANSMISSION OF THE REQUEST**

The form, duly completed, and the void cheque or equivalent proof from your financial institution (where the method of payment selected is direct deposit) must be send to the email address below:

**payables@ia.ca**