

420-2238 Yukon Street Vancouver, BC, V5Y 3P2 Phone: 604-592-2972

Toll Free: 1-877-592-2972

Accounts Payable New Vendor Set Up

PCA's accounts payable system. You may fax the form to (604) 592-2982 or send via		
email to recyclingservices@productcare.org.		
Citial to recyclingsorvious aproductions.org	<u>, </u>	
Company Name		
Address		
City	Postal Code	
Oity	1 03101 0000	
Business Number (BN):		
, ,		
Accounts Receivable contact person:		
Foreit	Dhana	
Email:	Phone:	
Name of person completing the form (prin	nt)	
Traine or person compressing and room (prin		
Signature		
Date		



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contact@productcare.org

Direct Deposit Authorization

To have Product Care Association directly deposited to your Company's Bank or other Financial Institution, please complete the authorization and details below and return to us. You may fax the form to (604) 592-2982 or send via email to recyclingservices@productcare.org.

Company Name		
Address		
0.4	Destal On the	
City	Postal Code	
Contact Name (please print)		
Signature	Date:	
Orginature	Date.	
Email:	Phone:	
Details of account to which payments are to be deposited		
	<u> </u>	
Bank or Financial Institution Name		
Address of Branch		
City	Postal Code	
- Oity	1 00101 0000	
Account No.:		
Transit No. (5 digits):	Bank Number (3 digits):	
To oneuro accuracy it is recor	mmondod vou attach a cample /	
To ensure accuracy it is recommended you attach a sample / copy of your Companies cheque marked "VOID"		
copy of your companies cheque marked "void"		