



**DIRECT DEPOSIT INSTRUCTIONS**

**Project Invested:** \_\_\_\_\_

**Investor Information**

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Country \_\_\_\_\_

**Bank Account Information**

Financial Institution \_\_\_\_\_

Branch Address \_\_\_\_\_

Transit # \_\_\_\_\_ Bank Code \_\_\_\_\_

Account Number \_\_\_\_\_

I authorize Sloan Partners LLP, In Trust, to credit my bank account for the cash distributions or similar payments. I will notify Sloan Partners In Trust, in writing, if I decide to rescind this direct deposit request or make other changes to my account.

Authorized By: \_\_\_\_\_ Date: \_\_\_\_\_

Note: Please provide a cheque marked "void" to ensure the correct information is submitted.