

**PAYOR'S ACKNOWLEDGEMENT**

The undersigned Payor(s), (each) being a Payor that is **not** one and the same as the Payee that issued this Payee Letter of Undertaking, hereby acknowledges the provisions of this Payee Letter of Undertaking and confirms to the Bank that it has authorized the Payee to issue cash management debits in relation to the Payor(s)'s account(s) with a Processing Member. The Payor further acknowledges that in the event of any dispute, no recourse will be provided through the clearing system and the Payor must address any such disputes directly with the Payee.

This Acknowledgement may be cancelled or revoked at any time upon notice being provided to the Payee either in writing or orally.

Payor Financial Institution Information *(Please print clearly)*

Branch Number: \_\_\_\_\_  
Institution Number: \_\_\_\_\_  
Payor Account Number: \_\_\_\_\_  
Name of Payor Financial Institution: \_\_\_\_\_  
Branch Address: \_\_\_\_\_  
City & Province: \_\_\_\_\_  
Postal Code \_\_\_\_\_

Payment Information *(Please type or print clearly)*

Please specify whether the payment is a:  
*(Please check one)*

- Fixed Amount: *(Please specify)* \_\_\_\_\_
- Variable Amount: If variable, please specify whether there is a maximum amount or indicate N/A if there is no maximum amount: \_\_\_\_\_

Occurring at: *(Please check one)*

- Set intervals: Please specify the timing (i.e. weekly, bi-weekly, monthly) \_\_\_\_\_
- Sporadic intervals \_\_\_\_\_

Are top-ups or adjustments permissible?  
*(Please check one)*

- Yes
- No

\_\_\_\_\_  
[NAME OF PAYOR]

Per: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Per: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_