

## Vendor Setup / EFT & ACH Authorization request Form

Submit this form to ap@greenfield.com

Greenfield Global Inc. 6985 Financial Drive, Suite 501 Mississauga, Ontario L5N 0G3

| This section is for Greenfield Global Use Only  |   |
|---|---|
| Vendor Number: Re   | quested by:   |
|   | te Entered:   |
|   | oject: Location# Department#  |
| INSTRUCTIONS: Please complete the form and verify the banking section before submitting. Attach a "VOID" cheque or banking slip with the company name and account information printed on it if available. Sign and return the form to the above e-mail address.   |   |
| SUPPLIER INFORMATION  |   |
| Supplier Name   |   |
| Street Address  |   |
| City  | Province  |
| Country   | Postal Code   |
| HST/GST No.:  | QST No.:  |
| PAYMENT INFORMATION   |   |
| Currency CAD  | US Other  |
| Payment Terms N45   | Other   |
| AR Contact Name:  | AR Phone Number:  |
| E-mail for Remittance Advice  |   |
| PAYMENT METHOD  |   |
| CDN¢ EET DAVMENT —  |   |
| CDN\$ EFT PAYMENT   | US\$ EFT PAYMENT (For banks domiciled in Canada)  |
| Bank Name:  |   |
|   | (For banks domiciled in Canada)   |
| Bank Name:  | (For banks domiciled in Canada)  Bank Name:   |
| Bank Name: Bank Address:  | (For banks domiciled in Canada)  Bank Name:  Bank Address:  |
| Bank Name: Bank Address: Institution #:   | (For banks domiciled in Canada)  Bank Name:  Bank Address: Institution #:   |
| Bank Name: Bank Address: Institution #: Transit: Account #:  US\$ ACH Payment   | (For banks domiciled in Canada)  Bank Name:  Bank Address: Institution #:  Transit:   |
| Bank Name: Bank Address: Institution #: Transit: Account #:  US\$ ACH Payment (For banks domiciled in the USA)  | (For banks domiciled in Canada)  Bank Name:  Bank Address: Institution #:  Transit: Account #:  Cheque  |
| Bank Name: Bank Address: Institution #: Transit: Account #:  US\$ ACH Payment (For banks domiciled in the USA) Bank Name:   | (For banks domiciled in Canada)  Bank Name:  Bank Address: Institution #:  Transit: Account #:  |
| Bank Name: Bank Address: Institution #: Transit: Account #:  US\$ ACH Payment (For banks domiciled in the USA) Bank Name: Bank Address:   | (For banks domiciled in Canada)  Bank Name:  Bank Address: Institution #:  Transit: Account #:  Cheque  |
| Bank Name: Bank Address: Institution #: Transit: Account #:  US\$ ACH Payment (For banks domiciled in the USA) Bank Name:   | (For banks domiciled in Canada)  Bank Name:  Bank Address: Institution #:  Transit: Account #:  Cheque  |
| Bank Name: Bank Address: Institution #: Transit: Account #:  US\$ ACH Payment (For banks domiciled in the USA) Bank Name: Bank Address: ABA/Routing: Account #:  AUTHORIZATION: The Supplier hereby authorizes Greenfield Global to process Transfer (EFT), where applicable. The Supplier acknowledges that the originatio | Bank Name: Bank Address: Institution #: Transit: Account #:  Cheque  Remit to Address (if different from above):  stall payments directly to the Supplier's bank account through Electronic Funds on of all electronic transactions to the specified account must comply with all as received written notice of its termination from the Supplier. The Supplier agrees ation contained herein. The Supplier hereby indemnifies and holds Greenfield where changes to the information contained herein have been made by the al, as well as for any payments that contravene applicable law. |