

PLEASE TYPE OR PRINT CLEARLY, complete Member Information items 1-4 and attach a cheque marked VOID. (If a VOIDED cheque is <u>not</u> attached ALL CELLS MUST BE COMPLETED)

Member Information – (# 1- 4 mandatory)																	
1. Member Name														OM emb			
3. E-mail Address													_	Pho		F	
(for Remittance Advic	e)												n	ımb	er		
Financial Institut	tion	n In	forr	nat	ion	(ro	nuir	od o	nlv i	fal		DEI) ch) is	not	attached)
Name				mat		(/ C	quir		ny n	14	01			·yu	. 13		unacheaj
Branch Address	Ctr	oot /	\ddr														
Branch Address	Street Address																
	Cit	У											Pr	ovin	ce		Postal Code
Bank Account Information (required only if a VOIDED cheque is not attached)																	
Branch Transit # (5 Digits)																	
Institution # (3 Digits)					<u>.</u>	L											
Account # (up to 16 Digits)																	
The following route and transit numbers can be found in your passbook, on your bank statement, encoded deposit slip, or cheque (sample below); or, by contacting your financial institution.																	
Declaration of Bank Account																	
In the absence of a voided/unused cheque for identification of my bank and account numbers, I assume all responsibility for the accuracy of the payment directions, no misdirected payments will be replaced by the Ontario Medical Association.																	
CRA considers honoraria to be taxable income earned from "holding an office" by you personally. Only personal bank accounts can be accepted for deposit. Reimbursements cannot be made to a Corporation.																	
Signature												Date					
OMA Privacy Policy Any and all information collected by OMA is kept strictly confidential, and is used in keeping with the OMA Privacy Policy , which may be obtained by contacting OMA Membership Operations or on <u>our website</u> .																	

Please note that you will receive an email Payment Notification from RBC to advise you of the total payment to be made by direct deposit.

If you have any questions, please contact our Finance Department: Phone: (416) 340-2952, Fax (416) 599-9309; Email: <u>MemberHonoraria@oma.org</u>