

ELECTRICAL INDUSTRY INSURANCE BENEFIT TRUST FUND OF ALBERTA

#200, 4224 – 93 Street, Edmonton, Alberta, T6E 5P5

Phone: (780) 465-2882 Toll Free: 1-800-268-3649

**CANCELLATION NOTICE OF
PRE-AUTHORIZED DEBIT PLAN AGREEMENT**

PLEASE PRINT

DATE: _____ (MMM/DD/YYYY)

Plan Member's Name: _____

SIN/Stakeholder Number: _____

Address: _____

Apt #	Street Address	City	Province	Postal Code
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Phone Number: () _____ Cell Phone Number: () _____

CANCELLATION NOTICE

I/we cancel my/our authorization for the above-captioned Fund to withdraw monthly self-payments (pre-authorized debits) against my/our account number previously provided. I/we acknowledge that this cancellation does not terminate any other obligation that I/we may have with the Electrical Industry Insurance Benefit Trust Fund of Alberta.

Signature of Account Holder:

Signature:

Date: (MMM/DD/YYYY)

Signature of Joint Account Holder (if applicable):

Signature:

Date: (MMM/DD/YYYY)

Print Name of Joint Account Holder: _____
Last Name, First Name