

# AUTHORIZATION LETTER

Date \_\_\_\_\_

Account Name \_\_\_\_\_

School Name \_\_\_\_\_

Your Financial Institution & Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

To whom it may concern:

Please forward, by mail or fax, a copy of the June 2019 bank statement( must show June 30<sup>th</sup> ending balance) for the account list below to

Upper Grand District School Board  
Attention: Jennifer Thackwray, Accounting Analyst  
500 Victoria Road N  
Guelph ON  
N1E 6K2  
Fax Number 519-822-4590

Bank Transit Number: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

Signing Authorities: 1) \_\_\_\_\_  
Print Name  
2) \_\_\_\_\_  
Print Name  
3) \_\_\_\_\_  
Print Name  
4) \_\_\_\_\_  
Print Name

The Finance Department of the Upper Grand District School Board requires this information in order to complete the June 2019 bank reconciliation for the School Year End. If you have any questions please call Jennifer Thackwray at 519-822-4420, extension 795.

\_\_\_\_\_  
Signing Officer Signature