

# CHROME RIVER EXTERNAL CLAIMANT INFORMATION

**Step 1:** The Department Contact should fill in the first section. Once completed, forward the form to the individual who will need to be setup in Chrome River. The individual can complete step 2 of the form and forward directly back to Financial Services.

## DEPARTMENT CONTACT INFORMATION

Requestor Name: Ally Howard

Department Name: JD Admissions and Recruitment, Schulich School of Law

Email: law.admissions@dal.ca Phone #: 902-494-2068 Date: 9-Feb-2023

Who will be entering the expense report into Chrome River on behalf of this individual (if different from the requestor)? Tris Healy

Has Financial Services been requested to setup this individual up in Chrome River previously?

Was this individual a previous employee or student? If yes, please provide the Dalhousie ID (if known)  Dalhousie ID

Purpose for Expense: Travel subsidy for Weldon Welcome Days event

For travel, provide dates: Trip Start Date  Trip End Date

**Step 2:** Please complete information as requested below and email to Dalhousie University, Financial Services at [finpay@dal.ca](mailto:finpay@dal.ca).

## EXTERNAL CLAIMANT INFORMATION

Individual's Full Name:  Primary Phone #:

Mailing Address:  Alt Phone #:

Primary Email:

Alternative Email:

I certify all the above information is true and correct. The above information is given to Dalhousie University in order to be reimbursed for expenditures that are to be charged against Dalhousie University's funds or funds administered by Dalhousie University and these amounts have not previously been, nor will be, claimed or reimbursed to me by Dalhousie University or any other organization.

Signature \_\_\_\_\_ Date (DD-MMM-YY):

## BANKING INFORMATION

Remittance Currency: CAD  USD  Other  Specify Currency

For payments in CAD, please complete the '**DIRECT DEPOSIT INFORMATION FORM FOR INDIVIDUALS**'. For payments in USD, and the individual's address is in the USA, remittance will be by USD cheque.

For other foreign currency, please provide documentation from your bank confirming account details. The documentation should include the **Account Holder's Name, Bank Account Number, Bank SWIFT/IBAN/ABA Number, and Bank Name and Address.**

If Account Holder is different from External Claimant, provide a reason

# DIRECT DEPOSIT INFORMATION FORM FOR INDIVIDUALS



Phone 902-494-2219

Email finpay@dal.ca

**TO:** Dalhousie University, Financial Services  
ATTN: Accounts Payable

<b>FROM:</b>	<b>Name</b>	<b>Primary Phone</b>	<input type="text"/>
	<input type="text"/>	<b>Primary Email</b>	<input type="text"/>
	<b>Mailing Address</b>	<b>Alternative Phone</b>	<input type="text"/>
	<input type="text"/>	<b>Alternative Email</b>	<input type="text"/>

Please pay expense reports for the above-noted individual via CAD direct deposit to the following bank account in Canada:

## AFFIX COPY OF VOID CANADIAN FINANCIAL INSTITUTION CHEQUE HERE

**Note:** Please ensure void cheque has individual's name pre-printed by your bank for our verification.

If cheques are not available, please supply **one** of the following:

- Copy of top portion of bank statement showing individual's name and account number
- Copy of letter provided by your bank verifying the individual's name and account number

I understand that notification of payment will be transmitted via e-mail.

My e-mail address is:

Required for direct deposit (Files sent in PDF format)

Individual's Signature

Date

**Note: if the individual does NOT have a bank account in a Canadian financial institution, this form is not required.**

## **INSTRUCTIONS FOR COMPLETION**

### **COMPLETE ALL SECTIONS**

#### **General Person Information:**

Please ensure your address is correct and up to date. This address should be the individual's current mailing address.

#### **Void Cheque required:**

Attach a copy of a void cheque in the space provided. Please ensure the void cheque has your name pre-printed by your bank for our verification.

If a cheque is not available, please supply one of the following:

- Copy of the top portion of your bank statement showing your name and account number
- Copy of a letter provided by your bank verifying your name and account number

Note: This form can only be used for payments deposited in Canadian funds to a Canadian bank account.

#### **Email address:**

All Direct Deposit Advice Notifications will be sent to the primary email address provided.

#### **Individual's Signature:**

Signatures must be original and will be accepted on a scanned or faxed document. Please note that digital signatures are not accepted.

#### **Forward completed form to Dalhousie University by one of the following methods:**

Email: [finpay@dal.ca](mailto:finpay@dal.ca)

Fax: 902-494-2848

Mail: Financial Services  
Attn: Accounts Payable  
Henry Hicks Building  
PO Box 15000  
Halifax, NS B3H 4R2