SHOPPERS Confidential Inc.
Mystery Shopping Services

Direct Deposit Application

I hereby authorize (Name of Company) _____Shoppers Confidential Inc._____ through Royal Bank of Canada, to make deposits to my chequing account, number _____

I will advise you of any change in this regard, and the authorization is to remain in effect until cancelled in writing.

X _____
(Signature)

*See diagram below for assistance

_____
Financial Institution:

Institution Number

_____

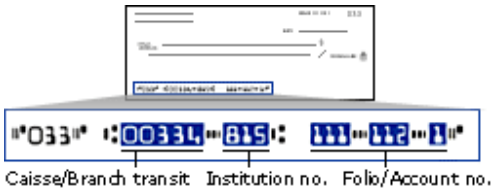
_____
Address:

Branch Transit

_____
Full name of Account:

Account Number

PLEASE ATTACH A "VOID" CHEQUE



Return this form along with a "voided" cheque to:

Shoppers Confidential Inc.
Attn: Accounting Dept
1-772 Queen St. S.
Kitchener, ON N2M 1A4