



**STEP#5: MAIL OR FAX THIS FORM**

Mail this form to:  
City of Brampton  
ATTENTION: Accounts Payable Supervisor  
2 Wellington Street West, 2<sup>nd</sup> Floor  
Brampton, Ontario  
L6Y 4R2

or e-mail to [accounts payable@brampton.ca](mailto:accounts payable@brampton.ca)

The personal information on this form is collected under authority of the Municipal Act, SO 2001, c.25 and will be used for the purpose of providing Direct Deposit payments for City vendors. Questions about the collection of personal information should be directed to the Accounts Payable Supervisor, 2 Wellington Street West, 2<sup>nd</sup> Floor, Brampton, Ontario, L6Y 4R2, Tel: 905 874 2239

## Email Sample

**From:** corporate.e-commerce@rbc.com  
**Sent:** 2005/01/27 4:17 PM  
**To:** JDOE@ABCCOMPANY.COM  
**Subject:** Payment Receipt Advice

THE CORPORATION OF THE CITY OF BRAMPTON                      ABC COMPANY LIMITED

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Payment Information

Payor: CITY OF BRAMPTON                      Effective Payment Date: January 30, 2005  
Payment Amount: \$     700.00 CAD                      Payment Trace #: REV-000197

Direct Responses/Queries to:  
ap.remittance@brampton.ca

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**Sample Email Remittance Advice**

Remittance Information

Reference Code	Reference Information	Date	Total Amount	Discount Taken	Amount Paid
Invoice Number Voucher	62255101 00325838	01/21/2004-Invoice	300.00	0.00	300.00
Invoice Number Voucher	40120187 00325839	01/13/2004-Invoice	400.00	0.00	400.00

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This e-mail message is information only. Please do not reply.  
Queries are to be directed to the e-mail address provided in the payment information section above.