

Expense Type	Supplier	Your Account Number	Pre-Authorized Payment	Contact Number	Completed ✓
<b>Recurring Expenses</b>					
Hydro			\$		
Heat			\$		
Gas			\$		
Water			\$		
Taxes			\$		
Mortgage			\$		
Other			\$		
<b>Loans</b>					
Car Loan			\$		
Credit Line			\$		
Other Loans			\$		
Other Loans			\$		
<b>Insurance</b>					
Home / Business			\$		
Auto			\$		
Other			\$		
<b>Savings and Pre-Authorized Debits</b>					
RRSP Savings			\$		
RESP Savings			\$		
Investment Savings			\$		
Charitable Donations			\$		
Other			\$		

- I'd like a member of Kindred's Financial Planning Team to contact me regarding my financial plan, investments, or retirement plans.
- I'd like a member of Kindred's Lending Team to contact me regarding my loans or mortgage.
- I'd like to receive emails on Kindred's products, services, and community activities and to provide feedback on Kindred's products and services from time to time. *Please refer to our Marketing Consent page on kindredcu.com or contact us for more details. You can withdraw your consent at any time.*

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Signature: \_\_\_\_\_ Best time to call: \_\_\_\_\_

Email: \_\_\_\_\_ Preferred method of contact \_\_\_\_\_



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<b>OFFICE USE ONLY</b>	Date: _____
Member Name: _____	Member Number: _____