



Pre-Authorized Debit Agreement (PAD)

Here's how it works:

1. Fill in the authorization form on the bottom of this page and "void" one of your personal cheques.
2. Scan and send documents to church treasurer (neto@telus.net) or accountant (accounting@simplechurches.ca)
Or mail it directly to the accountant: simplechurches c/o 201 East 23rd St., North Vancouver, B.C. V7L 3E4

In the event you decide to change banks, change the amounts being withdrawn, discontinue your automatic withdrawals or make any other changes all we require is written notification from you.

One tax receipt will be issued at year end for the total year's giving.

Should you ever desire to make an extra donation - simply put it in the offering envelope at your local church. This will be credited to your yearly giving but will not affect your automated donation agreement.

If you have further questions you can contact Neto or the accountant at the e-mail addresses listed above.

PAD Authorization Form

I choose to donate to simplechurches by Pre-authorized Debit Agreement and authorize simplechurches to automatically withdraw donations from my bank account.

I may revoke my authorization at any time, subject to providing notice of two weeks. To obtain a cancellation form or for more information on my right to cancel a PAD agreement, I may contact my financial institution or visit www.cdnpay.ca

I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on my recourse rights I may contact my financial institution or visit www.cdnpay.ca

Signed: _____

Please include a personal cheque marked "VOID".

Date to begin: _____

Frequency of withdrawals (check box)

- Once/month 3rd **or** 18th The debit will be processed on the
 Twice/month 3rd **and** 18th dates indicated or next business day.

Please apply the funds as follows:

General Fund \$ _____

Designated to:

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL donation \$ _____

This donation is made on behalf of:

An Individual A Business

Name _____

Address _____

Postal Code _____

Phone # _____

e-mail _____