

Pre-Authorized Debit Form

Revised December 2012

Completed forms should be printed, signed and submitted to the church in person or mail. **Please include a void cheque** with your form to ensure accuracy of banking information.



Elim
PENTECOSTAL
TABERNACLE

Contributor Information

Full Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____ Telephone #: _____

Bank Account Information

(please submit a void cheque or contact your bank for information)

Deposit Account Number: _____ Branch Transit Number _____

Financial Institution Number: _____ Chequing Savings

Financial Institution Name: _____

Financial Institution Address: _____

Pre-Authorized Debit (PAD) Details

You can choose to make one payment per month on either the 1st or 15th or you can make two payments per month on both the 1st and 15th.

1st of each month

You, the Payor, authorize Elim Pentecostal Tabernacle to debit the bank account identified above for \$ _____ on the **First** of every month or the next business day. The money is to be allocated to the following funds:

Tithe \$ _____ Building Fund \$ _____

Missions \$ _____ The Old, Old Story \$ _____

15th of the each month

You, the Payor, authorize Elim Pentecostal Tabernacle to debit the bank account identified above for \$ _____ on the **Fifteenth** of every month or the next business day. The money is to be allocated to the following funds:

Tithe \$ _____ Building Fund \$ _____

Missions \$ _____ The Old, Old Story \$ _____

Pre-authorized debit category: Personal

You, the Payor may revoke your authorization at any time in writing or by phone subject to providing 30 days notice. To obtain a cancellation form please contact the church office.

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized by you or is not consistent with this Pre-authorized Debit Agreement. For more information, contact your financial institution or visit www.cdnpay.ca.



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Signature of Account Holder

Signature of Joint Account Holder (if applicable)

Name: _____

Name: _____

Date: _____

Date: _____

Notes

- Forms are available in the church foyer or on our website (elim.nf.ca/give). The website form can be completed online but you must print it, sign it and return to the church
- Forms **must** be signed by the account holder (s) to be valid
- There is a choice to have one payment per month or two
 - To be debited on the 1st or 15th of each month
- Please identify how you want the payment to be allocated (Tithe, Building Fund, Missions, The Old Old Story)
- To ensure we have the correct banking information please submit a void cheque or a pre-authorized debit form from your bank
- Completed forms can be returned to the church office or placed in the offering plate in a sealed envelope marked “bank form”
- Information on the forms will be kept strictly confidential and completed forms will be kept in a secure environment
- If you want to change the amount you are giving, a new form must be completed with the new amounts and signed
- If you want to cancel the payments, please contact Sharon at the church office
- There is no change to how receipts are provided by the church. They will be issued as they are today
- Numbered envelopes will be distributed to everyone as they are today. If you no longer require numbered envelopes please contact the church office
- Any questions can be directed to Sharon Sansome at the church office or Dale Grimes (Treasurer)