

TRUSTEES OF THE ROMAN CATHOLIC PARISH OF SAINT JOHN XXIII

Winnipeg, Manitoba

PRE-AUTHORIZED DEBIT (PAD) AGREEMENT
Contributions for the Building God's Home Fund

Name: _____ Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: () _____

I authorize the Trustees of the Roman Catholic Parish of Saint John XXIII to arrange for and make automatic deductions from my bank account, at the following interval:

☐ on the 15th of each month, or the next business day
or ☐ on the 30th of each month, or the next business day
in the amount of: \$ _____
beginning in the month of _____, 20_____.

This deduction is made on behalf of: ☐ an Individual ☐ a Business

I may revoke my authorization at any time in writing by mail or fax, subject to providing notice of 30 days to the address shown below. To obtain a sample 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.

Trustees of the Roman Catholic Parish of Saint John XXIII
3390 Portage Avenue, Winnipeg, Manitoba, R3K 0Z3
Tel: 204-832-7175
Fax: 204-885-2447



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.

BANK INFORMATION

To ensure accuracy, a sample cheque marked "VOID" must accompany this form.

Financial Institution: _____

Address: _____

Account No. _____

Branch No.: _____

Date: _____

Signature: _____