

St. John the Apostle Parish, 2340 Baseline Road, Ottawa, ON, K2C 0C9,
613-829-4908. Finance.sjap@magma.ca

PRE-AUTHORIZED DEBIT (PAD) - MONTHLY DONATION

Your regular contributions will allow us to continue the important pastoral and temporal programs in our parish throughout the year.
It will also provide St. John the Apostle Parish with consistent cash flow, particularly in the summer and during vacation times when revenues typically fall away.

Benefits:

- You will provide St. John the Apostle Parish with your regular donation using an easy payment plan on a monthly or twice monthly basis - your choice
- You will reduce the number of cheques you currently write each month
- You will receive a tax receipt for your donation after year end
- Donations given electronically reduce the amount of cash/cheques to be counted weekly and the cash on premises
- **The debit will be processed on the 5th and/or 20th of each month or the next business day**
- You may change the amount deducted or designation at any time, in writing
- **You may revoke your authorization at any time, subject to providing 30 days written notice.**
- You can eliminate the need for a box of donation envelopes by notifying the office.

You may continue to make your donations for "Special Collections" by using the envelopes at the church entrance.

Be sure to identify yourself on these envelopes, for tax donation receipt purposes, by putting your name and the amount on the envelope.

If you no longer use the Envelope Box, your ID # becomes the first 3 letters of your last name, and first 2 letters of first name. i.e. Brown, Jack = BROJA.

Simply fill out the enrolment form opposite and return this in a sealed envelope marked to the attention of Pearl Beausoleil, Bookkeeper, and place it in the Sunday collection basket or drop it off at the parish office or email it per below.

For further information, please contact the Bookkeeper, Pearl Beausoleil, 613-762-1062 or leave a message for a return phone call – or by email at finance.sjap@magma.ca

Thank you for using "St. John the Apostle Parish" *Pre-Authorized Debit Donation Service (PAD)*. Please use this form to activate your monthly donation.

FOR OFFICE USE ONLY:

Processed on _____ by _____
(Dec 1, 2021)

ST. JOHN THE APOSTLE PARISH, OTTAWA
Pre-Authorized Debit (PAD) - Enrolment Form

Donor Name: _____

Address: _____ City: _____

Postal Code: _____ Telephone #: _____ (h) or (c)

Email: _____ Envelope # _____

<u>5th of Month</u>	and/or	<u>20th of Month</u>	<u>Donation directed to:</u>
\$ _____		\$ _____	<u>Sunday Collection</u> (White envelope)
\$ _____		\$ _____	<u>Building Fund</u> (Pink border envelope)
\$ _____		\$ _____	sub-total
\$ _____			TOTAL Monthly Donation from my/our bank account
beginning the 5 th or 20 th of _____, 2022.			

* I/We hereby authorize ST. JOHN THE APOSTLE PARISH, to debit the amount indicated above from the designated account below on an on-going monthly basis on the date(s) indicated above.

* I may revoke my authorization at any time, subject to providing 30 days written notice. To obtain a sample cancellation form, or for more information on the 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.

Signature of Primary Account Holder(s) Signature of Joint Account Holder(s)

If a joint account then both signatures are required.

Date Signed: _____ Date Signed: _____

PLEASE ATTACH A BLANK CHEQUE MARKED "VOID" or a deposit slip.

FOR OFFICE USE ONLY:

Name of Financial Institution _____

Transit # _____ Bank/Branch # _____

Account # _____