

PRE-AUTHORIZED GIVING AUTHORIZATION FORM

I hereby authorize the parish of Saint Patrick's in Wildfield (Brampton) to debit my account on **the twentieth (20th) day of each month** as my/our offertory donation (**not** including special collections) noted below:

My/our total monthly donation of:

\$		for the regular Sunday collection
\$		for the Parish Building Fund
\$		towards ShareLife

For a total of \$

NAME OF THE CONTRIBUTOR (FIRST AND LAST)

CONTRIBUTOR'S MAILING ADDRESS

Apt / Unit Number Street City/Town Province Postal Code

CONTRIBUTOR'S CONTACT PHONE NUMBER

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CONTRIBUTOR'S E-MAIL ADDRESS

NAME OF BANK / TRUST COMPANY / CREDIT UNION

TRANSIT NUMBER

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INSTITUTION NUMBER

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ACCOUNT NUMBER

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***Please attach a VOID CHEQUE
or an equivalent document from your bank branch
that shows your account information.***

CONTRIBUTOR'S SIGNATURE

Day

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Month

Year

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