

Pre-Authorized Debit (PAD) Agreement (For Canadian Residents Only)



Outreach Canada Ministries Inc. Date: ____/____/____
Month Day Year

I want to support _____ through a monthly donation.

Please debit my bank account (*attach VOID cheque*) in the amount of: \$ _____

Beginning in the month of: _____ Please circle day of preference: 1st or 15th

Authorized Signature: _____

Donor Name: _____

Street & Apt: _____

City: _____ Prov: _____ PC: _____

This donation is made on behalf of: (check one) _____ Individual or _____ Business

I may revoke my authorization at any time, subject to providing **30 day notice**. For your convenience we have provided a Cancellation Notice. **Please detach and retain for future use.**

Outreach Canada Ministries Inc. 7201—72nd St Unit 2 Delta BC V4G 1M5 www.outreach.ca	Telephone: 604-952-0050 ext 313 Fax: 604-952-4650 E-mail: contact@outreach.ca Charitable Business No. 10780 8750 RR0001	PADS must be received at the OC office by the 25th in order to begin in the subsequent month. (Dec PADS are sent to the bank November 25th)
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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.

Outreach Canada Ministries Inc. is a registered Canadian charitable organization, incorporated under the BC Societies Act as an Extra-Provincial Society. Business No. 10780 8750 RR0001



Pre-Authorized Debit (PAD) CANCELLATION NOTICE



To: Outreach Canada Ministries Inc. 7201 72nd St Unit 2 Delta BC V4G 1M5 Date: _____

I, _____, cancel my authorization to issue personal pre-authorized debit in the amount of \$ _____ against my account number _____ effective _____. I acknowledge this cancellation does not terminate any other obligation that I may have with Outreach Canada.

Signed: _____
Donor (Payor)/Valid Signing Authority If second signature is required

Where the Payor's account agreement requires the signature of two or more signing authorities, the signatures of all such person are required for the purposes of the Cancellation Notice.

Note: Subject to the terms of any agreement between a Payor and Payee including their Payor's PAD Agreement, a Cancellation Notice may be provided to a Payee by way of registered mail, telephone, e-mail, fax or prepaid courier and must be provided in compliance with the notice requirements for cancellations, if any, set out in the applicable Payor's PAD Agreement.