

# Pre-authorized Debit Agreement (PAD)



14219 – 88<sup>th</sup> Ave  
 Surrey, BC V3W 3L5  
 604.594.7133  
 www.gtcovchurch.org

I /we want to support Green Timbers Covenant Church through monthly donations using the PAD system. Please debit my bank account as follows.

(attach a VOIDED cheque)

Please indicate the monthly amount *	
\$	General Fund
\$	Designated Fund Name:
The debit amount will be processed to your account on the 15 <sup>th</sup> of each month or the next business day. Payment Type: Monthly contributions are made on behalf of an individual(s) as a <b>Personal PAD</b> .	
I/we waive any and all requirements for pre-notification of debiting. I/we agree to notify the treasurer no later than 5 working days prior to the 15 <sup>th</sup> of the month of any banking changes. Please ensure your account has sufficient funds to prevent reversing charges.	

Donor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Tel: \_\_\_\_\_

Envelope Number (if assigned): \_\_\_\_\_

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

I may revoke my authorization at any time, subject to providing notice of no less than 20 days. Contact the church office at 604.594.7133 or [finance@gtcovchurch.org](mailto:finance@gtcovchurch.org) to initiate this process.

I have certain recourse rights if any debit does not comply with this agreement. For example, I have rights 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.

*Do not fill in this section, for church use only*

Above Information is complete  PAD Start Date: \_\_\_\_\_ Returned Signed Copy

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_