

PRE-AUTHORIZED DEBIT (PAD) AGREEMENT

Thank you for supporting the work of our Lord here at Emmanuel Lutheran Church! This decision to automatically contribute monthly really helps out our congregational mission as well as our financial team who administer our Lord's resources.

DATE: _____

SIGNATURE: _____

DONOR NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

CHURCH ENVELOPE NUMBER: _____

I/We would like to support the Lord's work at Emmanuel Lutheran Church through automatic monthly contribution.

Please debit my bank account monthly (VOID cheque attached or Direct Deposit Information) for this amount:

\$ _____

Notes:

- The debit will be processed to your account on the 1st business day of each month.
- This total amount will be allocated to Current/Operating Account only.
- If you wish to contribute to other church funds or make special donations, please use your offering envelopes.
- You may revoke or change this authorization at any time, subject to providing notice 20 days before the next pre-authorized debit date.
- You have certain recourse rights if any debit does not comply with this agreement. Example: You have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement.

Contact Information:

Emmanuel Lutheran Church
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