



PRE-AUTHORIZED DEBIT PAYMENT FORM

A Pre-Authorized Debit (PAD) is a donation automatically withdrawn directly from your Bank Account every month. It is an easy way to give regular support without the effort of post-dated cheques. To start a PAD, please clearly print all the required personal information on this form, along with your signature of authorization.

Name: _____ **Address:** _____

City: _____ **Province:** _____ **Postal Code:** _____

Telephone: _____ **Email:** _____

I would like to send a monthly donation of the following amount on the 1st ___ or 15th ___ of every month.

\$10.00 a month \$15.00 a month \$20.00 a month \$30.00 a month

Other: \$ _____ a month **Start Date:** _____

Please fill out the following information or attach a void cheque.

Bank Name & Address: _____

Branch No: _____ **Bank Transit No:** _____

Bank Account No: _____

I hereby authorize New Mercy Ministries to withdraw the amount listed above monthly. I understand that the information recorded above will be used to process all future monthly donations automatically until otherwise directed.

I may revoke my authorization at any time, subject to providing a 30 day notice by mail or phone. I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. For more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit www.cdnpay.ca.

Signature: _____ **Date:** _____

Please return this completed form by e-mail to newmercyministries@gmail.com or by mail to New Mercy Ministries, 5112 Hwy 62 South, Belleville, ON K8N 0L5.

New Mercy Ministries | P: 613-771-1364
5112 Hwy 62 South | P: 613-827-8500
Belleville, ON | E: newmercyministries@gmail.com
K8N 0L5 | www.nmmcanada.com