PCC PAR Number: _____

Contributor's Name		Envelope #:
	(Please Print)	
I hereby request and authorize	The United Church of C	Canada* on behalf of:
Knox Presbyterian Church_ (name of congregation)		
20 Quebec Street, Guelph, (address of congregation)	ON N1H 2T4	
		e amount of \$, starting on the ibution to be allocated as noted below.
Distribution is to be as follows:	4	
Our Church's General Fund:	\$ Other: \$	for
		(please specify, e.g. PWS&D)
Bank/Institution No: T	ransit/Branch No:	Account No:
		business (please tick correct category)
Signature:		Date:
 cancellation form obtained from www.cdnpay.ca I have certain recourse rights if a reimbursement for any debit tha obtain more information on my I waive my right to receive pre-radvance notice of the amount of The use, retention and disclosure 	at any time, subject to providing my church's PAR Contact, by company debit does not comply with the tis not authorized or is not constructions are course rights, I may contact my notification of the amount of the pre-authorized remittance before of personal information collect	to providing notice of 15 days. notice of 15 days at which time I will submit a contacting my financial institution or by visiting this agreement. For example, I have the right to receive istent with this pre-authorized remittance agreement. The financial institution or visit www.cdnpay.ca pre-authorized remittance and agree that I do not required.
		program for congregations of The Presbyterian Church
For office use only Name of Church PAR Contact		Phone#