



Pre- Authorized Giving Form

Easy Giving through Pre-Authorized Giving St. James and St. Brendan

Business Number: PCSJA

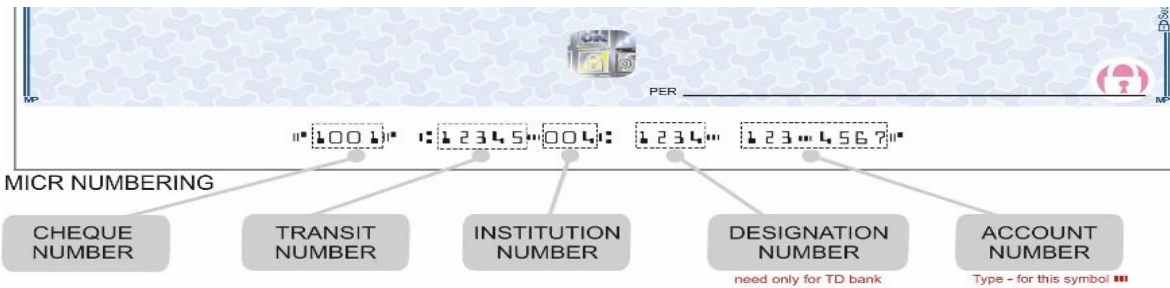
New* Increase Decrease Change Banking* Cancel

Name(S) _____
 Address _____
 City _____ Postal Code _____
 Phone _____ Email _____

* For New or Changed Banking, please provide a void cheque OR complete the table below:

Cheque Number not required	Transit (Branch) Number					Financial Institution Number					Designation Number					Account Number				

Payments can be taken on the month, 1st, 15th or 30th.



I/we authorize debit _____ hereby you to my/our account each month on the _____ of each month in the amount of \$ _____ payable to the Diocese of Niagara on behalf of **St. James and St. Brendan, in Port Colborne, Ontario**. Your treatment of each payment shall be the same as if I/we had personally issued a cheque authorizing you to pay as indicated and to debit my/our account accordingly.

IMPORTANT: This authorization may be cancelled upon written notice. Please note that the Church Office must receive any change by the 15th of the month for it to take effect the following month.

Signature (1) _____ Date _____

Signature (2) _____ Date _____

The Diocese of Niagara remits Pre-Authorized Giving donations back to **St. James and St. Brendan in Port Colborne, Ontario. Please contact the church office at 905-834-3184 with any questions or to make any changes.