

Pre-Authorized Debit Form



To: Christian Life Community Church

☐ NEW SIGN-UP ☐ CHANGE MY INFORMATION

DONOR INFORMATION

Donor 1 First Name Middle Name Last Name

Donor 2 First Name Middle Name Last Name

Address

City Province Postal Code

Email Address Phone Number

DONATION INFORMATION

Location

☐ Abbotsford

Per Withdrawal

\$ _____ General Fund

\$ _____ Missions

\$ _____ Abbotsford Building Fund

\$ _____ Other

Withdrawal Schedule

☐ 3rd of the month

☐ 18th of the month

☐ Both

Start date for donations:

Month Day Year

I/We (the below named Donor(s)) authorize Christian Life Community Church to debit my/our account indicated for the designated amounts on each withdrawal schedule.

Each payment shall be the same as if I/we had personally issued a cheque authorizing the Bank to pay Christian Life Community Church as indicated and to debit the amount specified to my/our account.

I/We will notify Christian Life Community Church promptly in writing if I/we move the account from one Bank or branch to another, or if there is any other change in the account. I/We understand that the Bank is not responsible to verify whether these payments are properly debited to my/our account. This authorization may be cancelled at any time upon written notice by me/us to Christian Life Community Church. Any delivery of this authorization to CLCC constitutes delivery by me/us to the Bank. I/We am/are all the persons who are required to sign on the below account.

Donor 1 Signature Month Day Year

Donor 2 Signature Month Day Year

Please include a cheque marked "VOID"
or your bank account pre-authorized debit form
Contact: Laurie Purdy at 604.853.4166 or accounting@clcc.ca
Christian Life Community Church | 35131 Straiton Road
Abbotsford BC | V2S 7Z1
604.853.4166 | www.clcc.ca