

Monthly offering Pre-authorized Debit (PAD) Agreement

奉獻自動轉帳授權書

Makarios Evangelical (613 Queen Avenue, New Westminster, BC V Tel: 778-358-1444 E-mail: office@makarios	3M 1L1					Update inform	on 新申請 nation 更新資料 取消自動轉帳	
I wish to support \$debit my bank account 本人願意透過銀行每	t on the 1 st or th	ne nex	rt business da	y of eac	h month	n. (<mark>Please attac</mark>	<mark>h a VOID cheque</mark>)	
下一個工作日,從本	八直按起/ Φ_ 人帳戶扣除上:	述金額	頁。 (請連同	平 一張"	默紹王 <mark>失效"</mark>	支票一併交回)	明水本川加多	7
Please specify allocation 請注明奉獻金額作以	•				_	o the General Fu	nd)	
				\$				
Other	's 其他:			\$				
I I		An Individua 個人	I		A business 公司			
Donor name	奉獻人姓名:							
Offering number								
Address	地址:							
Telephone	電話:							
Email address	電郵:							
Signature:				Date: _				
授權簽署			_	日期				

^{*} Please return the signed PAD agreement together with a VOID cheque to Pastor Jessica or Liza lee. 請將已簽署的自動轉帳授權書連同失效支票一起交給 Pastor Jessica 或 Liza Lee 姊妹。

I may revoke my authorization at any time, subject to provide written notice of 15 days. To obtain a sample cancellation form, or for more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit www.payments.ca or contact:

本人可以在任何時候終止上述授權,只要在十五日之前提供有關書面通知,就可以由該月即時生效。若要索取有關終止授權的樣本表格,或取消是次協議的更多資料,本人可以向有關銀行查詢,或登入網頁www.payments.ca 或聯絡:

Makarios Evangelical Church

613 Queen Avenue, New Westminster, BC V3M 1L1 Tel: 778-358-1444

E-mail: office@makarios-bc.org

I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.payments.ca.

The information on this form is strictly confidential.

假若上述授權轉帳有任何不符合有關之協議訂定,本人將保留一切追索權利,例如,對於任何未經授權或不符合本 PAD 協議的轉帳,我有權獲得補償。本人可以向有關銀行查詢更多有關追索權利的資料,或登入網頁www.payments.ca 此表格上的信息是嚴格保密的。

(如果中英文之間的翻譯上有出入,一切以英文作準)