

SAG Authorization Form

Donor/Account Holder:

Names(s) _____

Address _____

City _____

Province _____

Postal Code _____

Phone Number _____

E-mail _____

The donor is (circle one):

An Individual a Business

Signature

Name _____

Date _____

Signature of Joint Account Holder

(if applicable)

Name _____

Date _____

PLEASE PRINT CLEARLY & ATTACH VOID CHEQUE

Parish & Location

*God is able to provide
you with every
blessing in
abundance, so that
you may always have
enough of everything,
and may provide in
abundance for every
good work.*

*(2 Corinthians 9:8
NRSV)*



**PRE-AUTHORIZED
GIVING PLAN**

Administered by :
The RC Bishop of Nelson
Catholic Pastoral Centre
3665 Benvoulin Rd.
Kelowna BC V1W 4M7
250-448-2725 x 240

PRE-AUTHORIZED GIVING PLAN

The work of our parishes is made possible through the generosity of our parishioners, who embrace their responsibility to their spiritual home.

- ◆ We give because by our gift we define our lives as giving people
- ◆ We give because we are grateful to God, who has given much to us
- ◆ We give because we appreciate our parish
- ◆ We give because we want to participate in the ongoing work of the Church
- ◆ We give because we desire that the Gospel influence our world
- ◆ We give because we share the burdens and the blessings of our Christian community
- ◆ We give because Jesus calls us to use our money

BENEFITS FOR YOU AND THE PARISH

SAG is convenient. Your offering is deducted automatically. SAG allows you to support your parish when you are away—a benefit to the church, since expenses continue all year long. Most importantly, you are in control. You can increase or decrease your amount or withdraw from the SAG plan simply by dropping a signed note in the collection basket.

For example: If you usually contribute \$20 a week, to maintain the same level of giving, you would need to donate \$86.67 a month. Why that odd amount? Because there are not exactly four weeks in each month, so it is necessary to multiply your weekly amount by 4.33 not 4.

We are committed to keeping your personal information confidential and secure. The SAG system uses sophisticated security measures, including encryption. The Diocese's Office of Financial Administration administers the program for participating parishes, but the parish will continue to issue your tax receipts.

HOW DO I ENROLL IN SAG?

1. Decide the amount of your monthly offertory contribution to be withdrawn from your bank account each month
2. Fill out the form on the reverse of the next panel. Include a blank cheque marked "VOID". Place both in a sealed envelope and put it in the collection basket or drop off or mail it to the Parish Office.
3. Or: E-transfer: send donations directly through your bank account to: etransfer.rcb@nelsondiocese.org and then call 250-448-2725 ext 240 or email appeals@nelsondiocese.org for the security question. Please identify the parish in the remarks.

WILL I STILL USE ENVELOPES?

If you prefer to not have automatic debit for the special collections you will need the envelopes.

DETAILS & AUTHORIZATION

I, the Payor, authorize the parish listed on the reverse and the financial institution designated on the attached void cheque to begin deductions on or around the 15th of each month in the amount of:

- ◇ \$130.00 (equivalent of \$30 wk.)
- ◇ \$86.68 (equivalent of \$20 wk.)
- ◇ \$65.00 (equivalent of \$15 wk.)
- ◇ \$43.33 (equivalent of \$10 wk.)
- ◇ Other monthly Amount \$_____
- ◇ Apply the same amount or \$_____ to each special collection

I understand that the Roman Catholic Bishop of Nelson will administer this Pre-authorized Debit Agreement.

I may revoke my authorization at any time subject to providing at least 30 days written notice. 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 Pre-Authorized Debit Agreement.

To obtain a sample cancellation form or more information on my right to cancel a PAD agreement or for more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.

