PRE-AUTHORIZED DEBIT (PAD) AGREEMENT

Cowichan Valley Basket Society

5810 Garden Street. Duncan B.C V9L 3V9
Tel: 250.746.1566 Email: donate@cvbs.ca Web: cvbs.ca

1. Donor Information (Please print clearly, additional instructions on reverse)

First name: (optional) Last Name: (optional)

Spouse First Name: Spouse Last Name:

Street Address:

City: Province:

Postal code: Telephone:

Email Address (optional):

2. Bank Account Information (complete and/or attach void cheque)

(see next page for sample cheque showing identifying information)

Financial Institution:

Name:

Branch Address:

Account Number: (up to 12 digits)

Branch Transit: (5 digits) Financial Institution: (3 digits)

3. Pre-Authorized Debit (PAD) Details

This donation is made on behalf of: (check one) ☐ Individual ☐ Business

Please debit my account in the amount: $

Each month on the: (check one or both) ☐ 1st of the month (or next business day) ☐ 15th of the month (or next business day)

Starting Date:

I/we may revoke my authorization at any time, subject to providing 30 days written notice. To obtain a sample cancellation form, or for more information on my right to cancel a PAD agreement, I/we may contact my financial institution or visit www.cdnpay.ca.

I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/we 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/we may contact my financial institution or visit www.cdnpay.ca.

Signature of Account Holder:

Name (please print):

Date:

Signature of Joint Account Holder (if applicable):

Name (please print):

Date:

PAD AGREEMENT - ADDITIONAL INSTRUCTIONS

Part 1: Donor Information

Please completely fill out the donor information to ensure the payment can be processed and charitable donation receipt issued if applicable. Note: as per CRA policy, donation receipts can only be issued in the name of the true donor (e.g. payments made by a corporation cannot be receipted to an individual), and are non-refundable. Gifts made from a joint account of spouses may be issued in either or both names. If acting as a trustee or agent for another in making gift, please contact us first.

Generally, eligible gifts are issued receipts annually by the end of February. If you have special requirements, please contact us.

2. Bank Account Information

The branch transit number, financial institution number, and bank account number are located at the bottom edge of your cheque. Branch transit numbers are always 5 digits long and financial institution numbers are always 3 digits long. Bank account numbers may be up to 12 digits long. Below is an example of a cheque:

If you complete the bank account information, it is not strictly necessary to provide a void cheque (or equivalent from the bank); however, we nonetheless suggest providing so that we can verify the information submitted before processing. Furthermore, we may request additional documentation to verify your identity and/or banking information.

3. Pre-Authorized Debit (PAD) Details

Please fully complete the PAD details, sign and date. If the PAD is drawn on a joint account, both account holders are required to sign and date.

If not designated, the donation will be accepted as a gift to the general fund.

4. Submission Information or More Information

Please send the original completed and signed form to the **Cowichan Valley Basket Society 5810 Garden Street, Duncan B.C. V9L 3V9** For more information, please contact the office by email: donate@cvbs.ca or call: 250.746.1566.