

The Diocese of Kootenay
The Anglican Church of Canada

Pre-Authorized Payment Authorization

Church/Congregation Name & Location

Effective Date

SEE ATTACHED MONTHLY PAYMENT SCHEDULE

Please complete the following and forward this form to the Diocese of Kootenay:

BANKING INFORMATION:

Name of Parish Financial Institution: _____

Branch Address: _____
Street City Postal Code

Branch No. _____ Transit No. _____ Acct. No. _____

TYPE OF ACCOUNT: Chequing ☐ Savings ☐ Current ☐

We hereby authorize the Diocese of Kootenay to debit our bank account:

1. the semi-monthly amount as indicated on the attached payment schedule ☐
or
2. the amount of the semi-monthly payroll remittance only ☐

Frequency of debit: Payroll - on or about the 11th & 26th of each month.
KFS & Clergy Moving – on or about the 21st of each month.

Other than the semi-monthly payroll remittance, this authorization may be canceled upon written notice.

For verification purposes, please enclose one of your parish cheques marked "VOID".

Authorized Signature

Date: _____

Authorized Signature

If you prefer to pay items other than payroll remittances by cheque, please forward remittances early in the month, preferably payable no later than the 21st of the month.

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