



Pre-Authorized Giving

I/we, hereby authorize Pathfinders in the Marketplace ("Pathfinders") to direct debit my bank account.

This donation is made on behalf of (check which applies):
___ an Individual ___ a Business

Full Legal Name(s): _____

Exact Name(s) in which Account is Held: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone Number: _____ Email Address: _____

Your Financial Institution _____

Branch Address: _____

City: _____ Province: _____ Postal Code: _____

Account No.: _____

Branch No.: _____ Institution No.: _____

This authorization may be cancelled at any time upon written notice to Pathfinders. Please notify us 30 days prior to cancellation date. Obtain cancellation form from <http://www.pathfindersitm.com/images/PITM-EFT-Cancellation.pdf>.

I/we authorize Pathfinders in the Marketplace to debit the above account in the amount of:

\$ _____ on the 1st OR the 15th day of each month (circle one).

I/we understand that our donation will be used as needed to fund Pathfinders programming, to purchase materials for outreach, to help with administration, and/or pay staff salaries.

*Please remember Pathfinders is charged \$5.00 every time we attempt to debit your account and there are insufficient funds!

Signature of Account Holder(s) _____ Date _____

For verification, please ATTACH a blank "VOID" cheque here to this form.

For more information, contact Bob Black at 519-851-9774 OR email me at bblack@pathfindersitm.com.

Thank You!

Pathfinders in the Marketplace, 111 Waterloo Street, London Ontario, N6B 2M4 (519-851-9774)