



**PRE-AUTHORIZED GIVING AUTHORIZATION FORM**

I hereby authorize the Newman Centre to debit my account on the 20<sup>th</sup> day of each month as my/our offertory donation (**not including special collections**).

**My/our total monthly donation of:**

\$ \_\_\_\_\_ **Weekly Offertory**

Name(s) of Contributor(s):

\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Bank/Trust Company/Credit Union: \_\_\_\_\_

Branch: \_\_\_\_\_ Account Number: \_\_\_\_\_

**Please attach a VOID CHEQUE (or the form from your bank branch)**

Date: \_\_\_\_\_

Signature of Contributor(s):

\_\_\_\_\_

Email this completed form along with a scan or photo of a void cheque to: [office.administrator@newmantoronto.com](mailto:office.administrator@newmantoronto.com). Or mail the form and a void cheque to: Newman Centre Catholic Mission, Attention: Office Administrator, 89 St. George Street, Toronto, ON M5S 2E8