



L'Arche Winnipeg Inc.
118 Regent Avenue East
Winnipeg, Manitoba R2C 0C1
Ph. (204) 237-0300 Fax (204) 237-0316
Email: office@larchewinnipeg.org

PRE-AUTHORIZED DONATION DEBIT SET UP – DIRECT TRANSFER SERVICE

To be filled out by Donor:

Donor Name: _____

Donor Address: _____

AUTHORIZATION TO TRANSFER FUNDS

I hereby authorize L'Arche Winnipeg Inc. (via Casera Credit Union) to withdraw from my (our) account with the following institution:

Name of Financial Institution: _____

Address of Financial Institution: _____

Transit # (5 digit): _____ Institution # (3 digit): _____

Account Number: _____

Payment amount: \$ _____ Start Date: _____

Monthly debit only on one of the following: 1st of the month 15th of the month

I understand and agree that I will be responsible for any costs, which may be incurred to cancel, recall or stop payment in this Direct Transfer. As well, any charges that may result from not stopping this transfer will be at my expense. This authorization may be cancelled at any time upon receipt of written notice to L'Arche Winnipeg Inc.

Date: _____ Signature: _____

Daytime Phone #: _____

Please submit Voided Cheque (if available)

L'Arche Winnipeg Office use only:

Casera Credit Union Member information: New donation set up

Name: _____

Address: _____

Casera Credit Union Deposit Account Number: _____

Casera Credit Union Transit Number: _____

Purpose: Set up pre-authorized monthly debit – Donations.