

Pre-Authorized Remittance (PAR)

Change of Information Form

Please make the following change(s) to my PAR contribution, effective

_____, 20__

Contributor's Name: _____

Envelope Number: _____

Distribution: Amount

Other: a) General Offering: _____

(Please specify) b) _____: _____

c) _____: _____

d) _____: _____

Total (a+b+c + d): _____

Date

Signature of Contributor

Please return to Dalton Molson.