

PAR Authorization Card

I hereby request and authorize The United Church of Canada on behalf of:

Faith Lutheran Church
44 William Street West,
Oshawa, ON, L1G 1J9

to issue a cheque each month on my account in the amount of _____ as a contribution
by me to Faith Lutheran Church.

Contributor's Name: _____

Bank Account #: _____ Type of Account: _____

Distribution: a) General Offering: _____

Other: (Please specify)

b) _____ : _____

c) _____ : _____

d) _____ : _____

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

Name and Address of Bank or Trust Co. _____

TO ENSURE ACCURACY, A SAMPLE CHEQUE, MARKED "VOID" MUST
ACCOMPANY THIS FORM.

Date

Signature of Contributor