

WHAT IS THE PRE-AUTHORIZED GIVING PLAN?

The pre-authorized giving plan was created to assist parishioners in the Diocese of Saskatoon to make their regular offertory donations to their parish by direct debit of their bank account or a credit card. The plan can also be used for special appeals and other offerings.

WHY SHOULD I PARTICIPATE?

Advantages to you:

- ✓ Convenience. Your offering is deducted from your account once each month and automatically deposited in the Parish account.
- ✓ You can plan and budget your giving in advance for the whole year.
- ✓ You can continue to support your parish when you are away.

Advantages for our Parish:

- ✓ A regular, dependable flow of contributions to our Parish, especially over the summer holiday months.
- ✓ A reduction of paperwork and bookkeeping.

HOW WILL PRE-AUTHORIZED GIVING REPLACE MY CURRENT GIVING USING ENVELOPES?

If you participate in the PAG plan, you will not need to use envelopes for your regular offertory donation. Because the PAG does not include special collections such as Bishops Annual Appeal, Priest Pension Fund, etc., you will still need to pick up a box of envelopes to use for these special occasions.

CALCULATING FOR YOUR ANNUAL PAG

Weekly Offertory:

e.g. \$25 per wk x 52 wks = \$ 1,300.00

Building Fund:

e.g. \$250 / year \$ 200.00

Other:

e.g. \$5 per wk x 52 wks = \$ 260.00

TOTAL ANNUAL CONTRIBUTION \$ 1,760.00

To Calculate this monthly Pre-Authorized Giving for this example:
\$1760 / 12 = \$146.67
Suggested PAG: Round up to \$150.00/month*

*This is only a suggestion and does not preclude greater generosity.

HOW DO I ENROLL?

- Decide the amount of your monthly Offertory contribution to be withdrawn from your account each month. In order to maintain the same level of giving on a monthly basis, you will need to multiply your regular weekly amount by 4.33. The following table may be helpful in converting your offering and you assist our parish by rounding your monthly donation up.

Currently Weekly Amount	Monthly PAG Amount	Monthly PAG Rounded Up
\$10.00	\$43.30	\$45.00
\$15.00	\$64.95	\$65.00
\$20.00	\$86.60	\$90.00
\$ 25.00	\$108.25	\$110.00

- Fill out the form in this brochure and include a blank cheque from your account marked "VOID" or give through your credit card.
- Put both in a sealed envelope and place in the collection basket or bring/mail to the parish office.

You may stop or change your PAG at any time by simply writing a letter to our Parish (we need 30 days notice). If you would prefer to use a standardized cancellation form instead, you can obtain one at www.dscatholicfoundation.ca/parishresources.

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with the PAG Agreement. To obtain more information on your recourse rights, you may contact your financial institution or visit www.cdnpay.ca.

CONFIDENTIALITY & SECURITY

We are committed to keeping your personal information confidential and secure and have taken measures to protect the security of your personal information. To guarantee security and confidentiality, please make certain you place your enrolment form and void cheque in a sealed envelope and return it to our parish.

Our parish will continue to issue receipts for all donations.

AUTHORIZATION FORM

I/We herby authorize the Pastor of our Parish Church (parish name and town/city) _____

to debit my/our account on the 1st or 15th day of each month as follows:

\$ _____ For my/our regular Sunday offertory, and

\$ _____ For the Building Fund

\$ _____ For Other (Please Specify :)

\$ _____ Total for my Parish

BANK ACCOUNT INFORMTATION (VOID CHEQUE NEEDED)

Name: _____

Envelope Number: _____

Name of Bank/Trust Company / Credit Union or other Financial Institution

Branch: _____

Account Number : _____

Please Include a Void Cheque

Date: _____

Signature: _____

CREDIT CARD INFORMATION

Visa Master Card

Starting on the month _____ in 20 _____

Card Number: _____

Card Name Holder: _____

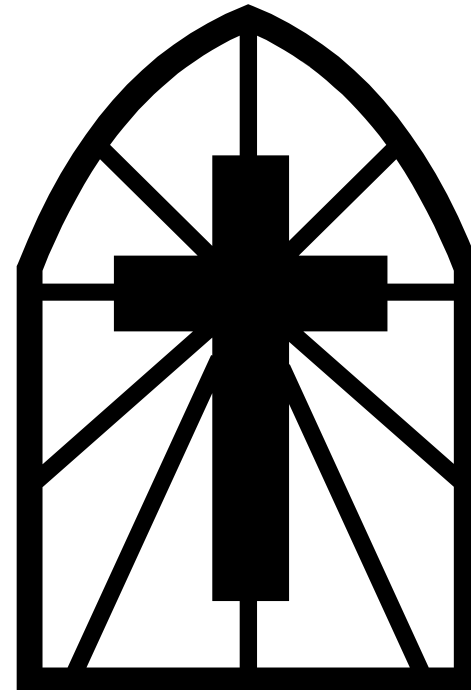
Expiry Date (MM/YY): _____ / _____

Authorization: _____

For Office Use Only – Parish Code: _____

*“What shall I return to the LORD
for all the good done to me?” Psalm 116: 12*

**PRE-AUTHORIZED GIVING PLAN
FOR MY PARISH**



*“Give and it will be given to you. A good measure,
pressed down, shaken together, running over, will be put
into your lap; for the measure you give will be the
measure you get back.”*

Luke 6:38

*Diocese of Saskatoon Catholic Foundation
123 Nelson Road, Saskatoon, SK S7S 1H1
306.242.1500
www.dscatholicfoundation.ca*