

PROJECT HARVEST – PROYECTO COSECHA

Pre-Authorized Debit (PAD) Agreement

Date _____

I wish to support the work of PROJECT HARVEST - GUATEMALA through monthly donations.

Please debit my bank account each month (VOID cheque attached):

\$10 _____ \$25 _____ \$50 _____ Other \$ _____

I would like this debit to be processed:

at the beginning of the month _____ at the middle of the month _____

This donation is made on behalf of an individual. I understand that a tax receipt for my monthly donations will be mailed to me at the end of the calendar year in which they were made. I also understand that I may revoke authorization at any time, subject to providing 30-days' notice* by contacting Gary Bowron at:

Phone: (905) 892-2428
Email: project.harvest.guatemala@gmail.com
Address: Project Harvest - Guatemala
17 Pancake Lane
Fonthill, ON L0S 1E2

Signature: _____

Donor name (please print): _____

Address: _____

*Note: For more information on your right to cancel a PAD Agreement, you may contact your financial institution or visit www.cdnpay.ca.

You also 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 PAD Agreement. For more information on your recourse rights, you may contact your financial institution or visit www.cdnpay.ca.

PROJECT HARVEST - Guatemala

Website: <http://www.projectharvest.org> Email: project.harvest.guatemala@gmail.com

Head office: 17 Pancake Lane, Fonthill, ON L0S 1E2

Project Harvest – Proyecto Cosecha is a registered Canadian charity
Federal Registered Charitable Organization Number: BN 82145 3503 RR0001