

First Sackville Presbyterian Church

Monthly Distribution of Gifts

First Sackville Congregational Budget: _____

Presbyterian Sharing/National Church Budget: _____

Presbyterian World Service & Development:
(PWS&D) _____

Camp Geddie: _____

Other (Clearly Specify): _____

TOTAL MONTHLY GIFT: _____

Donor's Name: _____
(Please Print)

For office use only

PAR AUTHORIZATION CARD

Church Code _____

I hereby request and authorize The United Church of Canada:
First Sackville Presbyterian Church PO Box 273 Lower Sackville N.S. B4C- 2S9

to issue a cheque each month on my account in the amount of \$ _____ as a contribution by me to the above local church.

Contributor's Name _____

Bank A/C# _____ Type of account _____

Distribution: Local _____ (as per attached sheet)

Name and Address of Bank or Trust Co. _____

To ensure accuracy a sample cheque, marked "Void", must accompany this card.

Date: _____

Contributor's Signature: _____