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St. Gabriel's Catholic Church

4907 – 53 Street Athabasca, AB T9S 1L1

(780) 675 – 2411 - stgabrielparish@telus.net - stgabrielscatholicchurch.ca

- 8. The Payee will provide to me / us, at the address provided in section 1:
 - a. with respect to fixed amount PADs, no written notice of the amount to be debited (the Payment Amount) and the date (s) on which the Payment Amount debited will be posted to my / our Account (the Payment Date), are required. As well, no notice is required when there is a change in the Payment amount or the Payment Date(s) negotiated by me and the Payee;
 - b. with respect to variable amount PADs, no written notice of the Payment Amount and the Payment Date(s), are required; and
 - c. with respect to a PAD plan that provides for the issuance of a PAD in response to a direct action of mine/ours (such as, but no limited to, a telephone instruction) requesting the Payee to issue a PAD in full or partial payment of a billing received by me/us for a payment obligation that meets the requirements of Section 2 of Rule H4, no notice is required.
- 9. The Payee may issue a PAD for:

	(unless
A monthly donation of \$	discontinued
Payment to come out on the 1 st of each month.	earlier)

AND Special Collections - schedule of dates and payments (listed below).

Date	Occasion	Amount
Jan.1	Feast of Mary, Mother of God/ New Year's Day	
Feb. 1	Catholic Missions in Canada	
Feb.1 or Mar. 1	Diocesan Collection - Camp St. Louis	
Mar. 1 or Apr. 1	Diocesan Collection - St. Paul Caritas	
Mar 1 or April 1	Holy Land/ Good Friday	
Apr.1 or May 1.	Diocesan Collection -Vocations/Good Shepard	
	Sunday	
May 1	The Pope's Pastoral Works	
Sept. 1	Needs of the Canadian Church	
Oct. 1	World Mission Sunday	
Nov. 1	Diocesan Collection -Youth Ministries/Camp St.	
	Louis	
Dec. 1	Christmas Offering	

10. I/We acknowledge that the Processing Institution is not required to verify that a PAD has been issued in accordance with the particulars of the Authorization including, but not limited to, the amount, or that any purpose of payment for which the PAD was issued has been fulfilled by the Payee as a condition to honoring a PAD issued or caused to be issued by the Payee on the Account.

Signature:	Date: