

St. John Paul II Catholic Community  
27107 Oakwood Road  
Oak Bank, Manitoba, R5N 0A6  
Ph. (204)-268-9020  
Email: [stjpii@stjohn-paulii.org](mailto:stjpii@stjohn-paulii.org)

**ST JOHN PAUL II PARISH**  
**AUTOMATIC WITHDRAWAL AUTHORIZATION**

**Part A - Parishioner Information**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Current Envelope #: \_\_\_\_\_  
Email Address: \_\_\_\_\_

---

**Part B - Authorization to Debit your Financial Institution**  
***FOR VERIFICATION PURPOSES, PLEASE ATTACH A VOIDED CHEQUE***

Name of Institution: \_\_\_\_\_  
Branch Address: \_\_\_\_\_ Account #: \_\_\_\_\_  
City/Province: \_\_\_\_\_ Transit #: \_\_\_\_\_

*For Sunday Collection, select either*  
***Monthly or Weekly***

Amount: Sunday Collection: **(Monthly)** \_\_\_\_\_  
Or Sunday Collection **(Weekly)** \_\_\_\_\_  
Building Fund **(Monthly)** \_\_\_\_\_

\*Monthly Withdrawals are made on the 15<sup>th</sup> of each month

\*Weekly Withdrawals are made on Friday

Authorization for Parts A&B

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

---

**Part C: Authorization to Cancel**

Effective Date: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_