Add money by direct debit



Complete this form to use direct debit to add money to your Impact Account or make a one-time donation to a charity or Giving Group.

Send the completed form by email to hello@charitableimpact.com.

01

Donor information

Good to know

When you add money, it's considered a donation, which means you're eligible for a tax receipt. The information you provide here should be for the person or company making the donation, and for whom the tax receipt will be issued.

Donor details

| Title | First name | Initial | Last name | | |
|--|------------|-----------------------------|-----------|-------------|--|
| | | | | | |
| Company name | | | | | |
| | | | | | |
| Email addres | SS | | | | |
| | | | | | |
| Phone numb | per | Preferred method of contact | | | |
| | | Email | Phone | | |
| | | | | | |
| Donor address (used for tax reporting) | | | | | |
| Address | | | | | |
| | | | | | |
| City | | Province | | Postal Code | |

02 Donation details What amount would you like to add? Which account would you like to add money to? Add money to Add money to Impact Account Company Account How often would you like to add money? Once* Monthly starting on the 10th or 25th of (month) If you don't have an account with us, where would you like to send your one-time donation?* (select one) Send to a charity: Send to a Giving Group: Add a note to the charity or Giving Group Give anonymously *For all one-time direct debit donations, a minimum of \$200 is required. For amounts less than \$200, please add money to your Impact Account by credit card. 03 Donor bank account information Please provide us with details about the bank account you'd like to direct debit. Institution number Branch number Account number

Attach a void cheque or direct debit form provided by your bank to help us verify your bank account information. Attach void cheque or direct debit form here, or as a separate page. 04 Agreement You authorize CHIMP: Charitable Impact Foundation (Canada) and the financial institution designated (or any other financial institution you may authorize at any time) to begin deductions as per your instructions for monthly regular recurring donations and/or one-time donations to your Impact Account(s). You confirm that the information you have provided on this form is complete and accurate. You, the payor, may revoke your authorization at any time via email to hello@charitableimpact.com, subject to providing notice of 30 days. 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 this PAD Agreement. To obtain more information on your recourse rights, contact your financial institution. Signature Date (mm/dd/yyyy)