



TO DONATE OR TO MAKE A PLEDGE

**TO THE ALBERTA KNIGHTS OF COLUMBUS CHARITABLE
FOUNDATION (ACF)**

Please print a copy of the attached form and complete.

This form can be used to make a onetime donation by cheque or from a credit card, or to make a pledge from a credit card or from an account.

In all cases kindly complete and sign the top portion as that directs the ACF as to who is to receive the tax receipt and also whether the donation/pledges funds are to go to charitable disbursements in the current year or to be held as capital for at least 10 years. The completed form is to be e-mailed or mailed to the State Office (see bottom of form).

Since the inception of our Charitable Foundation we have given over \$2,300,000 to deserving charities and we are very grateful for your support.



ALBERTA KNIGHTS OF COLUMBUS CHARITABLE FOUNDATION DONATION AND PLEDGE FORM

Donor's Name for Charitable Receipt _____
Council/Assembly Number _____ Name _____
Contact Name: _____
Mailing Address (including postal code) _____

Funds to be directed to charitable disbursements in the current year
Funds to be held as capital for at least 10 years

SIGNATURE _____

One Time Gift:

We enclose our cheque(s) in the amounts of \$ _____ payable to the Alberta Knights of Columbus Charitable Foundation. OR

Credit Card: VISA Mastercard

Name (as it appears on card)

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Card Number

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Expiry Month

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Expiry Year

Signature

Date: _____

I/We authorize the Alberta Knights of Columbus Charitable Foundation to withdraw the following **Pledge** over _____ years: Total Gift \$ _____
Please debit my bank account: (*attach VOID cheque*) to be processed on the 5th of each month or the next business day.

Monthly Amount of \$ _____ Start Date _____ End Date _____

Authorization:

Signature

Signature

Please attach a Void cheque

I may revoke my authorization at any time, subject to providing notice of 30 days. To obtain a sample cancellation form, or for more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit www.cdnpay.ca
I have certain recourse rights if any debit does not comply with this agreement. For example, I 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 my recourse rights, I may contact my financial institution or visit www.cdnpay.ca

Who to call with questions concerning a donation or pledge? Wally Streit (780-988-8719;780-437-4335) streitw@gmail.com Return your completed form (after taking a copy for your records) by e-mail (stateoffice@kofc.ab.ca) or via regular mail to:

Knights of Columbus State Council Office
#4, 5579 – 47 Street
Red Deer, Alberta T4N 1S1