



Changes to Pre-authorized Payment

Changes to pre-authorized bank withdrawals need to be received at least 3 business days prior to the withdrawal date. This form and any related information can be sent to ABWE Canada by mail, fax or email.

ABWE Canada
34-980 Adelaide Street S
London, ON N6E 1R3

Fax: 519-690-1618

Email:
donorhelp@abwe.ca

Inquiries:
877-690-1009

Name of Donor (s): _____

Address: _____

Phone: _____ Email: _____

Please check all applicable items and indicate the change being made:

____ Increase or decrease current support amount
Name of missionary or project: _____
New support amount: _____

____ Add new missionary/project support to existing withdrawal
Name of new missionary or project: _____
Support amount: _____

____ Change bank account information:
Description of change: _____
Void cheque included with this form: _____
Date to change to new information: _____ Immediately _____ Future date: _____

____ Other: _____

Please complete the following as applicable and sign below. Please note that if there are two names on your bank account & cheques, both people need to sign this document.

- I (we) authorize ABWE Canada to change the total amount being withdrawn from my (our) bank account from \$ _____ to \$ _____, effective as of _____ (date).
- I (we) authorize ABWE Canada to change my (our) bank account from which my (our) donation is withdrawn as noted above.

Signature: _____

Date signed: _____

Signature: _____

Date signed: _____