Form of Sample Cancellation Notice:

PRE-AUTHORIZED DEBITS (PAD)

CANCELLATION NOTICE

TO: MANOR PARK COMMUNITY COUNCIL (MPCC), also known as 'Payee'

DATE: _____
date

I/We, _____
Payor name(s)

cancel my/our authorization to issue PERSONAL pre-authorized debits in the amount of $_____
amount

against my/our account number_____
account number

effective on _____.
date

I/We acknowledge that this cancellation does not terminate any other obligation that I/we may have with the Payee.

Signed: _____ _____
Payor Payor

Note: Terms of the Pre-Authorized Debits (PAD) agreement:

"You, the Payor, may revoke your authorization at any time with a thirty (30) day notice in writing to MANOR PARK COMMUNITY COUNCIL (MPCC)."

MANOR PARK COMMUNITY COUNCIL
100 Braemar Street, Ottawa, ON K1K 3C9
613-741-4776 payments@manorpark.ca