



ANGLICAN DIOCESE  
OF OTTAWA  
GROWING IN FAITH TOGETHER

71 Bronson Avenue, Ottawa, ON K1R 6G6

Phone: 613-232-7124 ext. 225

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E-mail: gift@growinginfaithtogether.ca

Web: www.growinginfaithtogether.ca

Charitable registration number:

108084658RR0030



WONDERING WHAT TO GIVE?	5 Year Pledge			Annually	Quarterly	Monthly	Weekly
	Amount Pledged	Tax Savings	After Tax Amount				
Household Income							
\$ 25,000	\$ 500	\$ 230	\$ 270	\$ 100	\$ 25	\$ 8.33	\$ 1.92
\$ 25,000 to \$ 35,000	1,500	690	810	300	75	25.00	5.77
\$ 35,000 to \$ 50,000	2,500	1,150	1,350	500	125	41.67	9.62
\$ 50,000 to \$ 75,000	5,000	2,300	2,700	1,000	250	83.33	19.23
\$ 75,000 to \$ 100,000	10,000	4,640	5,360	2,000	500	166.67	38.46
\$ 100,000 to \$ 150,000	15,000	6,960	8,040	3,000	750	250.00	57.69
\$ 150,000 to \$ 250,000	25,000	11,600	13,400	5,000	1,250	416.67	96.15
\$ 250,000 +	50,000	23,200	26,800	10,000	2,500	833.33	192.31

All gifts are eligible for tax credits. The indicated savings are guidelines only and may vary depending on individual circumstances. This guideline is based on the maximum credit available after the first \$200 of donations. Please consult a professional tax advisor for more information.



**“GIFT” PRE-AUTHORIZED PAYMENT AUTHORIZATION**

I (We) authorize the Diocese of Ottawa in Ottawa, Ontario to process a debit in paper, electronic or other form in support of the Growing in Faith Together Campaign in the amount of :

\$ \_\_\_\_\_ from my (our) account on or about the 15th of each MONTH.

Please begin processing this request on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

**Name of Bank or Trust Company or Credit Union**  
\_\_\_\_\_

**Transit / Account Number**  
\_\_\_\_\_ / \_\_\_\_\_

**Account Type:** \_\_\_\_\_

**Donor Name:** \_\_\_\_\_

**Address / Contact Information:**  
\_\_\_\_\_  
\_\_\_\_\_

**Email:** \_\_\_\_\_

**This donation is made on behalf of:**  
 an Individual (s)     a Business (check one)  
 I may revoke my authorization at any time, subject to providing notice of \_\_\_\_\_ days - not to exceed 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.

I (We) acknowledge that I (we) have read and understood all of the provisions contained in the terms and conditions of the Pre-Authorized Payment Authorization.

I (We) attached our “Void” cheque.  
(Two signatures are required for joint accounts)

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

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

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

MY PLEDGE TO  
"GIFT"

please print

STEP 1  
DECIDE ON YOUR LEVEL  
OF SUPPORT

I/We \_\_\_\_\_

of the parish of \_\_\_\_\_  
wish to support the Growing in Faith Together  
Campaign with a **5 year pledge** of:

- \$1,000 or \$200 per year
- \$2,500 or \$500 per year
- \$5,000 or \$1,000 per year
- \$10,000 or \$2,000 per year
- \$15,000 or \$3,000 per year
- \$25,000 or \$5,000 per year
- \$50,000 or \$10,000 per year
- \$ \_\_\_\_\_ for \_\_\_\_\_ years  
or \$ \_\_\_\_\_ per year
- or a One-Time Gift of \$ \_\_\_\_\_

STEP 2  
DECIDE ON PAYMENT SCHEDULE

- Monthly
- Annually
- Specify \_\_\_\_\_

I enclose \$ \_\_\_\_\_ as my initial payment.

STEP 3  
DECIDE ON METHOD  
OF PAYMENT

The method of payment I/we prefer is:

- Cash
- Cheque (**Make cheque payable to:  
The "Growing in Faith Together"  
Campaign**)
- Post Dated Cheques
- Pre-Authorized Payment (see  
reverse)
- Publicly Traded Securities (see  
Notification Request for directions)
- Visa or MasterCard (circle one)  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiry: \_\_\_\_\_ / \_\_\_\_\_

CVV2\*: \_\_\_\_\_

My pledge starts on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(day/month/year)

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

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

Email: \_\_\_\_\_

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

\*Card Verification Value Code required for  
credit card transactions. The card code is the  
last 3 (or 4) digit number located on the back  
of your card on or above your signature line.

\*On-line pledge payments are accepted;  
however, please remit your pledge card to  
ensure accuracy.

BEQUEST/  
PUBLICLY TRADED SECURITIES  
NOTIFICATION/REQUEST

I/We \_\_\_\_\_

have made provisions for the:

- Parish
- Diocese
- National Church

in

- Our Will (Bequest)
- Our Life Insurance Policy
- Real Property

in the amount of \$ \_\_\_\_\_.  
Your bequest, received as part of GIFT, will be  
credited toward your parish campaign goal if  
you are 70 years of age or older. Please check  
this box if you are 70 years of age or will be at  
the end of 2012.

**We would like more information about  
Planned Giving options. Please:**

- Send us more information about our  
planned giving options.
- Ask the Diocesan Stewardship  
Development Officer to call us

**To arrange a gift of stock:**

1. Call Jane Scanlon, Diocesan Stewardship  
Development Officer at 613-232-7124,  
ext. 225, to request a securities transfer form,  
or download it from  
[www.growinginfaithtogether.ca](http://www.growinginfaithtogether.ca)

2. Fill out the form and send one copy to your  
broker and one copy to Jane Scanlon at  
[jane-scanlon@ottawa.anglican.ca](mailto:jane-scanlon@ottawa.anglican.ca) or mail it  
to GIFT, Diocese of Ottawa, 71 Bronson Ave.,  
Ottawa, ON K1R 6G6

**Thank you.**

AMBASSADOR'S  
NOTE & SUGGESTIONS

Visited By: \_\_\_\_\_

Captain or Chair: \_\_\_\_\_

Parishioner Information: \_\_\_\_\_

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

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