MONTHLY ONLINE BILL PAYMENT

Foursquare Gospel Church of Canada

ONLINE REMITTANCE FORM

CHURCH NAME: _____

BILL PAYMENT ACCOUNT#: _____

DATE OF ONLINE BILL PAYMENT: _____

INSTRUCTIONS:

1. Enter Church Name, Bill Payment Account# & Date
2. Enter Tithes, Missions & Other Payment amounts in Section A
3. Total the amount in Section A
4. Enter Foursquare Benefit Plan amounts in Section B
5. Total the amount in Section B
6. Enter the Grand Total (A+B) in Section C
7. Send this form to donations@foursquare.ca

SECTION A: Foursquare Gospel Church of Canada General Account

1. Extension Tithe $_____
2. A/R— Invoice #_____ $_____

Explain: _____

3. Loan Payment $_____

Explain: _____

4. License Fee $_____

For who: _____

5. Convention Fee $_____

For who: _____

6. Chilliwack Lake Camp $_____

Explain: _____

7. Foursquare General Missions $_____
8. Foursquare Kids

   India Kids $_____

   Other Kids Program $_____

Explain: _____

9. Other Designated Missions $_____

Explain: _____ $_____

_____ $_____

_____ $_____

10. Other $_____

Explain: _____

_____

TOTAL $ 0.00

SECTION B: Foursquare Benefit Plan Account

NAME OF EMPLOYEE	GROUP INSURANCE PREMIUM			PENSION PLAN CONTRIBUTIONS			
	For the Month Of _____			For the Month Of _____			
	Employer	Employee	TOTAL	Employer	Employee Mandatory	Employee Voluntary	TOTAL
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
			$ 0.00				$ 0.00
SUBTOTAL:	$ 0.00	$ 0.00		$ 0.00	$ 0.00	$ 0.00	
			GIP TOTAL $ 0.00				**PP TOTAL** $ 0.00

Group Insurance + Pension Plan TOTAL: $ 0.00

If there are any changes to be made to the FBP please submit a "Notification of Changes" form.

SECTION C: Grand Total

Section A $ 0.00 + **Section B $** 0.00 = **Grand Total C $** 0.00

Save and send to:
donations@foursquare.ca

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