

E. Sands & Associates Inc. Pre-Authorized Debit Amendment

Current Payment date(s) : \_\_\_\_\_

**DATE AMENDMENT**

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I, \_\_\_\_\_, hereby agree to change my Pre-Authorized Debit withdrawal date to the \_\_\_\_\_ (1<sup>st</sup>, 10<sup>th</sup>, 16<sup>th</sup> and/or 25<sup>th</sup>) of the month, effective as of \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(day) (month) (year)

**PAYMENT TERMS AMENDMENT**

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- Consumer Proposal
  - Change in Amount
  - Change in Duration
- Bankruptcy
  - Change in Amount
  - Change in Duration
  - Conditional Order
  - Mediated Settlement

I, \_\_\_\_\_, hereby agree to the following Pre-Authorized Debit terms effective as of \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(day) (month) (year)

\_\_\_\_\_ Payments of \_\_\_\_\_  
Number of Payments \$ amount of Payments

Total amount: \_\_\_\_\_

**AUTHORIZATION**

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\_\_\_\_\_  
Signature of the Debtor

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_