

**PRE-AUTHORIZED DEBIT – CANCELLATION**

To: Stevenson Management Services  
200 – 260 St. Mary Avenue  
Winnipeg, Manitoba  
R3C 0M6

Payment Type: **Pre-Authorized Debit – To be cancelled**

This is to certify that I/we, \_\_\_\_\_  
(Print Name(s) in full)

of \_\_\_\_\_  
(Street Address)

do hereby advise Stevenson Management Services to cancel the withdrawal from my account in the sum of \$ \_\_\_\_\_ as of \_\_\_\_\_, 20\_\_\_\_. As per the authorization form signed by yourself, the minimum cancellation requirement is two (2) weeks notice.

I/we acknowledge the cancellation will not be deemed as received until Stevenson Management forwards an acknowledgement.

\_\_\_\_\_  
(Signature)

Date \_\_\_\_\_ Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_