

## St. Christopher Catholic Parish E-tithing” Authorization Agreement

I/we authorize St. Christopher Catholic Parish to initiate debit entries and, if necessary, initiate any credit entries to correct an erroneous debit entry to my/our account at the Financial Institution listed below. I/we acknowledge that the origination of the ACH transactions to my/our account must comply with the provisions of U.S. Law and banking regulations.

Name on account (please print)\_\_\_\_\_

Address\_\_\_\_\_ City\_\_\_\_\_

State\_\_\_\_\_ Zip\_\_\_\_\_ Phone Number\_\_\_\_\_ Envelope #\_\_\_\_\_

Please debit my ongoing contribution from my (select one):

- Checking Account (attach voided check)
- Savings Account (attach voided withdrawal form)

**Contribution Information** (please indicate your contribution amount and frequency)

Amount \$\_\_\_\_\_ Effective date of first contribution\_\_\_\_\_

- Semi-monthly – Debited on the 1<sup>st</sup> and the 15<sup>th</sup>
- Monthly – Debited on the 1<sup>st</sup> or the 15<sup>th</sup> (Please circle one)

I/we understand that this authorization replaces any previous authorization and will remain in full force and effect until St. Christopher has received written notification from us of its termination in such time and manner as to afford St. Christopher and my Financial Institution a reasonable opportunity to act on it.

\_\_\_\_\_  
Authorized Signer

\_\_\_\_\_  
Date

- New
- Change