Authorization Agreement for Electronic Funds Transfer 2018-2019 Annual Offertory Donations

Company Name: St. Michael the Archangel Parish Company ID #34-4434729

I (we) hereby authorize St. Michael the Archangel Parish, hereinafter called COMPANY, to initiate debit entries to my (our) [] CHECKING [] SAVINGS account (select one) indicated below and the depository name below, hereinafter

called DEPOSITORY, to debit same to such account.		
Depository Name:		
City:	State:	Zip:
Account No:	Routing No:	
This authority is to remain in full force and effect from DEPOSITORY have received written notification from ICOMPANY and DEPOSITORY a reasonable opportunity	me (or either of us) of to act on it.	its termination in such a manner as to afforc
I authorize St. Michael the Archangel Parish to	begin this Electronic	Funds Transfer effective July 20, 2018.
Monthly Commitments:		
Sunday Collection Monthly Donation:	\$	To be deducted 20 th of each month
Building & Maintenance Monthly Donation:	\$	To be deducted 20 th of each month
St. Michael Cemetery Donation:	\$	To be deducted 20 th of each month
Special Annual Commitments:		
Rosary Altar Donation:	\$	To be deducted on September 20, 2018
Holy Name Donation:	\$	To be deducted on September 20, 2018
St. Michael Cemetery Donation:	\$	To be deducted on October 20, 2018
Christmas 2018 Donation:	\$	To be deducted on December 20, 2018
Easter 2019 Donation:	\$	To be deducted on April 20, 2019
Name(s):		Phone No:
Signature:		Date:

Directions:

If you desire to establish, continue or change the Electronic Funds Transfer for your Annual Offertory Donations, please complete this form, along with either a "voided check" or an "encoded deposit slip", and return them to: