

Authorization for Pre-Authorized Payments to St. Anthony Church

Today's Date _____

I (we) hereby authorize St. Anthony Church hereafter called COMPANY, to initiate debit entries to my (our)

Checking account _____ Statement savings account _____

Choose one.
Passbook savings
accounts cannot be
used for EFT.

and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

Bank (Depository name) _____
Address _____
City _____ State _____
Transit/ABA# _____ Account # _____

This is your bank's information.
Name of your bank and address. The
transit/ABA# is located at the bottom
left corner of your check. If you are
using a statement savings account,
please call your bank to get this
number.

Amount to debit _____

Choose one amount. Either an amount
to be withdrawn on a weekly basis or
an amount that will be withdrawn on a
monthly basis.

Weekly on Monday (Tuesday if Monday is a holiday) _____
OR

Choose either
weekly or
monthly.

Monthly (first Monday of the month, Tuesday if Monday is a holiday) _____

This authorization is to remain in full effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY a reasonable opportunity to act on it.

Print Name _____ Phone number _____

Print Name _____ Phone number _____

Signature _____ Date _____

Signature _____ Date _____

Please attach a voided check if a checking account is selected.