

Saint John Vianney Parish

ELECTRONIC CONTRIBUTION AUTHORIZATION FORM

Revised 1-30-15

Donation for: [please check appropriate box]

- ☐ Faith in Our Future Capital Campaign
- ☐ Foundation
- ☐ Maintenance
- ☐ Sunday Offertory

Member Authorization Form [please check appropriate box]

Effective Date: _____

- ☐ New Authorization
- ☐ Change Contribution Amount
- ☐ Change Contribution Date
- ☐ Change Financial Institution Account
- ☐ Discontinue Electronic Contribution as of _____
(date)

Contribution Amount Collected (check one):

- ☐ Semi-Monthly (transferred on the 5th and the 20th) \$ _____
- ☐ Monthly (the 5th or 20th ~ **CIRCLE ONE**) \$ _____
- ☐ Annual \$ _____
- ☐ One Time \$ _____
- ☐ Quarterly (the 5th or 20th ~ **CIRCLE ONE**) \$ _____


Name on Account (please print): _____ Offertory Envelope # _____

Address: _____

City: _____ State: _____ Zip: _____

Please accept my ongoing contribution from my:

- ☐ Checking Account **[*Attach a voided check]**
- ☐ Savings Account **[*Attach a savings deposit slip]**

 ***Don't forget to attach a VOIDED CHECK or SAVINGS DEPOSIT SLIP**

Routing # _____ Acct. #: _____

Routing number must start with 0, 1, 2, or 3, is 9 digits long, and is located at the bottom of check between these symbols  :  :

I authorize **St. John Vianney Parish** to process debit entries from my account. This authority will remain in effect until I give reasonable notification to terminate this authorization or until the last specified payment date.

Authorized Signature on account: _____ Today's Date: _____

FOR OFFICE USE ONLY

Envelope #

Date: