

**Parishioner Authorization Form**

Effective Date: \_\_\_\_\_

- New Authorization  
 Change Contribution Amount

- Change Contribution Date  
 Change Financial Institution Account  
 Discontinue Electronic Contribution

Name of Parishioner (Please Print)

Address

City

State

Zip

**Regular Contribution**

- Weekly (Transferred on Mondays)  
 Every Other Week (Transferred on Monday, beginning on \_\_\_\_\_)  
 Twice Monthly (Transferred on the 1<sup>st</sup> and the 15<sup>th</sup>)  
 Monthly (Transferred on either the 1<sup>st</sup> or the 15<sup>th</sup>)  
 CIRCLE ONE: 1<sup>ST</sup> 15<sup>TH</sup>  
 Total Amount Per Contribution \$ \_\_\_\_\_

**Debt Retirement Fund**

Monthly (Transferred on either the 1<sup>st</sup> or the 15<sup>th</sup> of the month)

Circle One: 1<sup>st</sup> 15<sup>th</sup>

Amount of Contribution \$ \_\_\_\_\_

**Church Enhancement**

Circle One: 1<sup>st</sup> 15<sup>th</sup>  
 Amount Per Contribution \$ \_\_\_\_\_

**Total Church Enhancement Gift**

\$ \_\_\_\_\_

**Holy Day Contributions**

Easter Offering \$ \_\_\_\_\_  
 (Transferred April 1<sup>st</sup>)

Christmas Offering \$ \_\_\_\_\_  
 (Transferred December 15<sup>th</sup>)

Please take my contribution directly from the account specified:

- Checking Account (attach a voided check)  Savings Account (attach a savings deposit slip)

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

Account #: \_\_\_\_\_

I authorize **Church of St. John the Baptist** to process debit entries to my account. I have attached a voided check or savings deposit slip. This authority will remain in effect until I give reasonable notification to terminate this authorization. (Please allow 7 days)

Authorized signature on my account:

Date:

**For Church Office Use**

Envelope #

Date

**Please attach a voided check or savings deposit slip.**