CHURCH OF THE ASSUMPTION



Donor Information:



I hereby authorize the Church of the Assumption to deposit my regular offertory contribution by initiating entries to my account at the financial institution (hereinafter "my bank") indicated in the **attached voided check.**

Envelope # (if applicable)
Name (please print):
Address:
City, State, Zip:
Telephone #:
Initial signup: (or change in bank or account#)
Start date:
(Please allow 10 days to 2 weeks for start-up.)
Amount of deduction \$
I wish my deductions to be made on: (check only one)
First day of each month
15th of each month
Each Monday
For change in amount: (voided check not required)
Change amount of deduction from \$ to \$
This authorization is to remain in full force and effect until the Church of the Assumption and my bank have received written notice from me of its termination, in such time and in such manner as to afford the Church of th Assumption and my bank a reasonable opportunity to act on it.
Donor Signature Date:

Please attach a voided check. It must include the 9 digit routing code and account number. Place this form with the attached voided check in an envelope, and drop it in the collection basket or deliver it to the parish office.

Thank you for your committed support of our parish.