

I authorize St. John the Baptist Catholic Parish to initiate withdrawals from my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the Church a reasonable opportunity to act on it. I can stop payment on any entry by notifying my financial institution 7 days before my account is charged. For your convenience and accuracy please attach a voided check, fill in the Monthly withdrawal amount and sign.

(Name of Financial Institution) (Branch)

(City) (State) (Zip Code)

(Signature)

(Name—Please Print)

(Address—Please Print)

Account No. _____

Financial Institution Routing Number _____
 (between these symbols | : | : on the bottom left of your check)

\$ _____ Monthly
Withdrawal will be made on the 16th of each month. (If the 16th falls on a federal holiday or weekend it will be withdrawn on the next business day.)

_____ **Start Month**
First Withdrawal will be on May 16th. (If you need us to postpone the 1st Withdrawal you must indicate which month to begin withdrawals, on the line above.)

**Monthly ACH
 Auto check / savings withdrawal
 ADVANTAGES**

- Remains consistent and convenient (while on vacation or traveling).
- Saves on the parish's cost of envelopes and postage.
- Way of the future - not many people write checks.
- Personal and financial information is with the parish - very secure and confidential.

Please return this form to the parish finance office. May God bless you!