

AUTHORIZATION FORM: AUTOMATIC CONTRIBUTION PROGRAM

Our Lady of the Woods Catholic Community

ES 10343

FOR OFFICE USE ONLY	ENVELOPE #	DATE
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Effective date of authorization: _____

Type of Authorization Form:

<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation
<input type="checkbox"/> Change donation date	

Last Name	First Name
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Address

City	State	Zip
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E-mail address (optional): _____

<p>Please debit my donation from my (check one):</p> <p><input type="checkbox"/> Checking Account (attach a voided check below)</p> <p><input type="checkbox"/> Savings Account (contact your financial institution for Routing #)</p>	<p>Routing Number: _____</p> <p>Valid Routing # must start with 0, 1, 2, or 3</p> <p>Account Number: _____</p> <p><small>⑆ 23456789⑆ 23 23456⑆ 000⑆</small></p> <p><small>Routing Number Account Number Check Number</small></p>
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<p>DATE OF FIRST DONATION:</p> <p>____/____/____</p>	<p>FREQUENCY OF DONATION:</p> <p><input type="checkbox"/> Weekly on Tuesdays</p> <p><input type="checkbox"/> Monthly on the 1st</p> <p><input type="checkbox"/> Monthly on the 7th</p> <p><input type="checkbox"/> Monthly on the 15th</p> <p><input type="checkbox"/> Monthly on the 25th</p> <p><input type="checkbox"/> Quarterly on Feb. 12, May 12, Aug. 12, Nov. 12</p> <p><input type="checkbox"/> Annually (show date on the left)</p>	<p>DESIGNATED AMOUNT:</p> <p>\$ _____</p>
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AGREEMENT

I authorize Our Lady of the Woods Church and Vanco Services, LLC to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.

Authorized Signature: _____ Date: _____

Please attach voided check here.