

St. Columba Church Authorization Agreement for Electronic Giving (ACH DEBITS)

There are no fees associated with electronic giving. Transactions is currently once per month. Giving once per month occurs on the 15th of each month. You may stop or change your giving amount at anytime by contacting the parish office in writing.

Please fill out this form completely, sign, and date it. Attach a voided check, and return it to the parish office via US Mail or drop it in the weekend collection in a sealed envelope. Thank you.

Company Name: St. Columba Church address: 1327 Lafond Ave, St Paul, MN 55104	
I (we) hereby authorize St. Columba Church , hereinafter called COMPANY, to initiate debit entries to my (our) <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account (select one) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S law.	
Depository (Bank's name and address) Name:	Branch location: City/State/Zip:
(Your account information) Routing Number:	Account Number:
This authorization is to remain in full force and effect until the COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the COMPANY and the DEPOSITORY a reasonable opportunity to act on it.	
Parishioner Name(s): Phone number: _____ - _____ - _____ Email address: _____ Monthly Giving/ACH Amount :\$ _____.	Envelope Number: _____ Address/City/State/Zip: ID Number _____
Signature:	Joint Signature:
Date	Date
NOTE: All written debit authorizations <u>must</u> provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.	Please attach a voided check to the bottom of this form.