St. Wenceslaus Catholic Church E-Tithing Enrollment Form

MONTHLY	OR	BI-MONTHLY
Total Monthly Offering \$		Total Monthly Offering \$
Month & Year of 1st Withdrawal		Month & Year of 1st Withdrawal
Please debit my account once a month on:		Please debit my account on the
5th OR 20th		5th AND 20th of each month \$

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED (ACH) PAYMENTS

I (we) authorize St. Wenceslaus Church to initiate debit entries to my (our) _____checking/___savings account **(select one)** indicated below and the depository financial institution named below 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.

Checking or Savings Account Transfers	ENVELOPE NUMBER:
Name of Bank	
Name on Account	
9-digit Bank Routing #	
Bank Account #	PLEASE ATTACH A VOIDED CHECK

Disclosures

This authority is to remain in full force and effect until St. Wenceslaus Church has received written notification from me of its termination in such time and in such manner as to afford St. Wenceslaus Church and Depository a reasonable opportunity to act on it. In no event shall it be effective with respect to entries processed by St. Wenceslaus Church prior to receipt of notice of termination.

I (we) further authorize St. Wenceslaus to initiate such credit entries to said account as may be necessary to any erroneous debit entries previously initiated thereto. I (we) authorize the Depository to accept and to credit or debit the amount of such entries to my (our) account.

I (we) have the right to stop payment of any entry by notification to Depository prior to the posting of item to the account.

The undersigned hereby agrees that all entries initiated hereunder are to be governed in all respects by the Rules of the Mid-America Payment Exchange as now or hereafter in effect and agrees to be bound thereby:

X ______ Signature(s) of Account holder(s)

Date: _____