



## Faith In Our Future Capital Campaign Automatic Payment Information and Authorization

**The Automatic Payment Plan offers the following benefits:**

- It saves time – fewer checks to write
- Helps meet your capital campaign commitment in a convenient and timely manner
- It's easy to sign up for and easy to cancel if you change your mind

**Here's how the Automatic Payment Plan works:**

You authorize regularly scheduled pledge payments to be deducted from your checking or savings account. Starting in July 2009, your donations will be made automatically on Mondays for those pledging weekly. If you prefer a monthly arrangement, specify which Monday of the month you prefer the deduction to be made, or if other arrangements need to be made for the timing of the debit, contact Nancy McMahan at the parish office, 651-489-8825. Your donation will appear on your checking or savings account statement. The authority you give to debit your account will remain in effect until you notify us in writing to terminate the authorization. The Automatic Payment Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete the authorization form below and return it to the parish office.

**All you need to do is:**

1. Mark the box before the type of account to indicate whether your donation will be deducted from your checking or savings account and what amount is to be deducted and at what frequency.
2. Fill in the date, your name, financial institution name and location, the account number of the checking or savings account you have chosen and your financial institution's routing/transit number, (the first number listed on the bottom of your checks, likely begins with 09 or 29).
3. Attach a voided check for verification of all financial institution information.
4. Lastly, be sure to sign the form and return it to the Parish Office.

### Authorization for Direct Payment

I authorize the Church of the Maternity of the Blessed Virgin to initiate electronic debit entries to my:  
 Checking Account or  Savings Account for my capital campaign pledge commitment.

I authorize to have \$ \_\_\_\_\_ debited from my account for my capital campaign commitment:

\_\_\_\_\_ Weekly on Mondays

\_\_\_\_\_ Monthly on the \_\_\_\_\_ (1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup>) Monday of the month

\_\_\_\_\_ By other arrangement to be made through the parish office

I acknowledge that the origination of ACH (direct payment) transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until your campaign pledge is fulfilled, unless we receive a cancellation in writing.

Date \_\_\_\_\_

Name \_\_\_\_\_

Financial Institution Name \_\_\_\_\_

Financial Institution City and State \_\_\_\_\_

Account Number at Financial Institution \_\_\_\_\_

Financial Institution Routing/Transit Number \_\_\_\_\_

Signature \_\_\_\_\_

STAPLE VOIDED CHECK TO THIS FORM. PLEASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS.