

## ST. JOHN PAUL II PARISH AUTOMATIC WITHDRAWAL REQUEST

In gratitude for God's blessings my/our automatic withdrawal will be: \_\_\_\_\_ monthly

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Date: \_\_\_\_\_

Please indicate the method: \_\_\_\_\_ entire amount on 2<sup>nd</sup> Tuesday of each month

\_\_\_\_\_ entire amount on 4<sup>th</sup> Tuesday of each month

\_\_\_\_\_ 1/2 on 2<sup>nd</sup> Tues. and 1/2 on 4<sup>th</sup> Tuesday

**Please enclose a voided check with this withdrawal request form and return to parish office**

I understand that I can cancel this agreement at any time by notifying St. John Paul II Parish.