

**Saint Bernard Church
Debit Authorization**

Company Name: St. Bernard Church Company ID Number 48-0634653

I (we) hereby authorize **St Bernard Church**, hereinafter called COMPANY, to initiate monthly debit entries to my (our) checking account/ savings account (select one) indicated below at the depository financial institution named below, hereafter 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 Name _____ Branch _____

City _____ State _____ Zip _____

Routing Number _____ Account Number _____

Please attach a voided check.

Monthly Contribution Information

I (we) hereby authorize COMPANY to debit my (our) account on the following day of each month:
(Please choose one)

5th _____

20th _____

Monthly contribution amount: \$ _____

For contributions to more than the General Fund, please enter the breakdown on the appropriate lines.

General Fund \$ _____

Building Fund \$ _____

Pray \$ _____

Community Health Ministry \$ _____

Unless otherwise noted all contributions will be applied to the General Fund

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s) _____ (Please Print)

Signature _____

Date _____