

**ST. MICHAEL PRE-AUTHORIZATION AGREEMENT  
AUTOMATIC PARISHIONER STEWARDSHIP CONTRIBUTIONS**

An easy way to establish weekly or monthly stewardship contributions is via automatic bank withdraw. Besides saving time from writing checks, this insures contributions are made as intended even when out of town, temporary adjustment of church attendance or just memory lapse that would otherwise lead to failure to make planned regular, periodic financial Stewardship contributions.

Please completely fill out the following voluntary form authorizing St. Michael's to arrange periodic payments per your Stewardship wishes. Keep a copy of this form for your records.

I (we) authorize St. Michael Catholic Church of Lincoln, NE, to initiate debit entries to my (our)

**Checking** /  **Savings Account** (*select one*) indicated below and the bank 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.

**Bank Name:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Transit/ABA No.:** \_\_\_\_\_ **Account Number:** \_\_\_\_\_  
(front bottom left side of check)

**Payment Amount:** \$ \_\_\_\_\_

**Payment Frequency:**

**Weekly**     or      **Monthly**     \_\_\_\_\_ 1<sup>st</sup> of Month     \_\_\_\_\_ 15<sup>th</sup> of Month (*please check one*)

**Additional Support Opportunities:** (withdrawn according to Church calendar)

- |   |  |
|---|--|
| <input type="checkbox"/> Solemnity of Mary [Jan] \$ _____     | <input type="checkbox"/> Southern Nebraska Register [Feb] \$ _____ |
| <input type="checkbox"/> Combined Collection [Mar] \$ _____   | <input type="checkbox"/> Ash Wednesday \$ _____                    |
| <input type="checkbox"/> Holy Land [Good Friday] \$ _____     | <input type="checkbox"/> Easter \$ _____                           |
| <input type="checkbox"/> Peter's Pence [Jun] \$ _____         | <input type="checkbox"/> Assumption [Aug] \$ _____                 |
| <input type="checkbox"/> Contemplative Sisters [Jul] \$ _____ | <input type="checkbox"/> World Mission Day [Oct] \$ _____          |
| <input type="checkbox"/> Christmas \$ _____                   | <input type="checkbox"/> Capital Campaign \$ _____                 |

**(Subject to change upon written notification by parishioner)**

**Disclosures**

This authority is to remain in full force and effect until St. Michael Catholic Church has received written notification from me (or either of us) of its termination in such time and in such manner as to afford St. Michael's and the Bank a reasonable opportunity to act on it. In no event shall notice be effective with respect to entries processed by St. Michael's prior to receipt of notice of termination. I understand that I (we) are responsible for all banking fees resulting from insufficient funds being available in my account when the transfer is initiated by St. Michael's according to my instructions.

I (we) further authorize St. Michael's to initiate such credit entries to said account as may be necessary to correct any erroneous debit entries previously initiated thereto. I (we) authorize the Bank 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 Bank 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 National ACH Association as now or hereafter in effect and agrees to be bound thereby:

Parishioner's Name(s): \_\_\_\_\_

Parishioner's Envelope #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please attach voided check**