

# AUTHORIZATION FORM

Holy Spirit Ecumenical Catholic Church

ES16332

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE						
Effective date of authorization: _____ Type of Authorization: <table style="display: inline-table; vertical-align: top; margin-left: 20px;"> <tr> <td><input type="checkbox"/> New Authorization</td> <td><input type="checkbox"/> Change credit card information</td> </tr> <tr> <td><input type="checkbox"/> Change donation amount</td> <td><input type="checkbox"/> Discontinue electronic donation</td> </tr> <tr> <td><input type="checkbox"/> Change donation date</td> <td></td> </tr> </table>			<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change credit card information	<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation	<input type="checkbox"/> Change donation date	
<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change credit card information							
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation							
<input type="checkbox"/> Change donation date								
Last Name		First Name						
Address								
City		State      Zip						
Email Address								
<b>DATE OF FIRST DONATION:</b> ____ / ____ / ____	<b>FREQUENCY OF DONATION:</b> (check one) <ul style="list-style-type: none"> <li><input type="checkbox"/> Weekly – Mondays</li> <li><input type="checkbox"/> Semi-Monthly – 1<sup>st</sup> and 15<sup>th</sup></li> <li><input type="checkbox"/> Monthly on the 1<sup>st</sup></li> <li><input type="checkbox"/> Monthly on the 15<sup>th</sup></li> </ul>	<b>FUNDS AND AMOUNTS:</b> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> General/Operating</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td style="text-align: right;"><b>Total</b></td> <td style="text-align: right;"><b>\$ _____</b></td> </tr> </table>	<input type="checkbox"/> General/Operating	\$ _____	<input type="checkbox"/> Other _____	\$ _____	<b>Total</b>	<b>\$ _____</b>
<input type="checkbox"/> General/Operating	\$ _____							
<input type="checkbox"/> Other _____	\$ _____							
<b>Total</b>	<b>\$ _____</b>							
<b>CHECKING / SAVINGS</b>	Please debit my donation from my (check one): <ul style="list-style-type: none"> <li><input type="checkbox"/> Savings Account (contact your financial institution for Routing #)</li> <li><input type="checkbox"/> Checking Account (attach a voided check below)</li> </ul>	Routing Number: _____ <b>Valid Routing # must start with 0, 1, 2, or 3</b>  Account Number: _____ 						
	I authorize the above organization to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.  Authorized Signature: _____ Date: _____							
<b>CREDIT CARD</b>	Please charge my donation to my (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card							
	Credit Card Number:	Expiration Date:						
	Name on Card:							
	Billing Address (if different from above):							
	I authorize the above church to charge my credit card in accordance with the information above.  Signature (as it appears on the credit card): _____ Date: _____							