

**CHURCH OF THE ANNUNCIATION
ELECTRONIC GIVING PAYMENT AUTHORIZATION FORM**

Please send completed form to the attention of Donna Muscarella at the Parish Center.

Please print all information. At least two weeks' notice of enrollment or change is required.

Name on Account		Phone #
Address		
City, State, and Zip		Email Address
Type of Authorization:	<input type="checkbox"/> New	<input type="checkbox"/> Change contribution schedule
	<input type="checkbox"/> Change bank account information	<input type="checkbox"/> Discontinue electronic giving
	<input type="checkbox"/> Change contribution amount	

Bank Account Information	
<i>Please complete only for new authorizations and requests to change bank account information.</i>	
Account Type	<input type="checkbox"/> Checking (Please attach a voided check.)
	<input type="checkbox"/> Savings (Please attach a blank deposit slip.)
Routing Number	
Account Number	
Bank Name	

Collection Envelopes	
Do you wish to receive collection envelopes?	<input type="checkbox"/> Yes <i>Please refer to the Frequently Asked Questions document for more information about offertory envelope use by electronic givers.</i>
	<input type="checkbox"/> No

Contribution Amount & Schedule

Contribution Amount Worksheet		
<i>Please use this worksheet to help calculate your donation amount for the table below.</i>		
1	Weekly contribution amount for regular Sunday collection	\$
2	Annual contribution amount (Line 1 x 52)	\$
3	Monthly contribution amount (Line 2 ÷ 12)	\$
4	Quarterly contribution amount (Line 2 ÷ 4)	\$
5	Semi-annual contribution amount (Line 2 ÷ 2)	\$

Contribution Schedule*	Contribution Amount <i>as calculated in the worksheet above</i>	Collection Day <i>the day of the month on which the withdrawal from your account will be made</i>
<input type="checkbox"/> Monthly (12 times a year)	\$	<input type="checkbox"/> 1 st
<input type="checkbox"/> Quarterly (4 times a year)		<input type="checkbox"/> 15 th
<input type="checkbox"/> Semi-annually (2 times a year)		
<input type="checkbox"/> Annually (once a year)		

*Quarterly donations are collected in January, April, July and October. Semi-annual donations are collected in January and July. Annual donations are collected in January.

I authorize the Church of the Annunciation to debit from the account specified on this form. This authorization will remain in effect until I give reasonable change or cancellation notice to terminate authorization. I understand that I will be charged a \$30.00 fee per transaction if any transactions fail due to insufficient funds or outdated account information.

Authorization: _____

Signature *Effective Date*

Print Name

For Office Use Only	Envelope Number	Date Entered	By
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