



# Authorization for Electronic Giving

Type of Authorization:	<input type="checkbox"/> New Authorization <input type="checkbox"/> Change Amount	<input type="checkbox"/> Change Date <input type="checkbox"/> Change Banking Information
------------------------	--	---

Last Name:	First Name(s)
------------	---------------

Address:

City:	State:	Zip:
-------	--------	------

Regular Donations: <b>Regular Amount:</b>  \$ _____  <input type="checkbox"/> Weekly - Mondays <input type="checkbox"/> Semi-Monthly (1st and 15th) <input type="checkbox"/> Monthly on the 1st <input type="checkbox"/> Monthly on the 15th	Special Annual Donations: <ul style="list-style-type: none"> <li><input type="checkbox"/> Immaculate Conception (Dec 8) \$ _____</li> <li><input type="checkbox"/> Christmas (Dec 25) \$ _____</li> <li><input type="checkbox"/> Solemnity of Mary (Jan 1) \$ _____</li> <li><input type="checkbox"/> Parish Outreach (Jan 15) \$ _____</li> <li><input type="checkbox"/> Ash Wednesday (Processed Feb 25) \$ _____</li> <li><input type="checkbox"/> Easter (Processed Apr 1 each year) \$ _____</li> <li><input type="checkbox"/> Ascension (Processed May 15) \$ _____</li> <li><input type="checkbox"/> Assumption of Mary (Aug 15) \$ _____</li> <li><input type="checkbox"/> All Saints Day (Nov 1) \$ _____</li> <li><input type="checkbox"/> Sandusky Central Catholic Schools (Nov 1) \$ _____</li> <li><input type="checkbox"/> Catholic Cemeteries (Nov 23) \$ _____</li> <li><input type="checkbox"/> Thanksgiving (Processed Nov 25) \$ _____</li> </ul>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____
--	---	--

Debit from Banking Account:	Routing Number: _____
<input type="checkbox"/> Checking (Attach Voided Check)	<i>(Valid Routing # starts with 0,1,2, or 3)</i>
<input type="checkbox"/> Savings (Contact Bank for Routing #)	<b>Bank Account Number:</b> _____

Charge Credit/Debit Card:	Credit Card #:	Expiration Date ____/____
<input type="checkbox"/> Visa	_____	
<input type="checkbox"/> Mastercard		
<input type="checkbox"/> Discover	Name on Card: _____	
<input type="checkbox"/> American Express		
	Billing Address (if different from above):	

I authorize St. Mary's Catholic Church to process the payments according to the information above:	
Signature:	Date: