

Christ the King Catholic Church Electronic Tithing

Christ the King Catholic Church ~ Electronic Payment Authorization (ACH)

- ♣ All payments will be deposited in Christ the King's General Fund.
- ⊕ Automatic withdrawals from your banking/checking account can occur weekly, semi-monthly, or monthly. Please select below.

Christ the	King Catho	olic Church ACH	l Deductio	ons		
Check one of the following:		Choose date for funds transfer:				
□ Start □ Stop □ Change	☐ Weekly (Mondays) ☐ Monthly (7th of the month*)		☐ Monthly (30th of the month*) ☐ Semi-Monthly (15th & 30th*)			
Effective Date:	☐ Monthly (15th of the month*) * If the 7th, 15th, or 30th fall on weeke		☐ 2nd Collection - Maintenance (15th only*) nd, transfer will occur on the previous Friday.			
Name (Last, First, Middle):			Envelop Amount \$	e # : of each pa	yment:	
I authorize Christ the King Catholic Church Signature:	to electronicall	y withdraw funds fro	om my bank a Date:	ccount.		
Home Street Address:		City:	State:	Zip:	Phone:	
Payments will be deducted from my: ☐ Checking Account		Return t	his form w	vith attac	hment to:	
(Attach a voided, cancelled or photocopy of a check to the bottom of this form - DO NOT attach a deposit slip)		Christ the King Catholic Church Attn: Pam Reid				
☐ Savings Account (Attach a voided or cancelled withdrawal s		1!	551 East D		nue	

YOUR NAME 123 YOUR STREET YOUR CITY, STATE 12345	12-345 6789 DATE:	1001
PAY TO THE ORDER OF:		_\$
YOUR FINANCIAL INSITUTION		DOLLAR
123 MAIN STREET CITY, STATE 12345		
NOTE: 000123	456 - 1001	