

AUTHORIZATION FORM

Name of the organization: **St. Therese of the Infant Jesus (Little Flower) Catholic Church (ES6706)**

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE												
Effective date of authorization: ____ / ____ / ____														
Type of authorization: <input type="checkbox"/> New authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Change donation date <input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic donation														
Last Name		First Name												
Address														
City		State Zip												
Email Address														
DATE OF FIRST DONATION: ____ / ____ / ____	FREQUENCY OF DONATION: <input type="checkbox"/> Weekly – Mondays <input type="checkbox"/> Semi-Monthly on the 1 st and 15 th <input type="checkbox"/> Monthly on the 1 st <input type="checkbox"/> Monthly on the 15 th	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">FUNDS:</td> <td style="width: 50%;">AMOUNTS:</td> </tr> <tr> <td><input type="checkbox"/> General/Operating</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Home Improvement Fund</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Godparent Program/Tuition Assistance</td> <td>\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Total from above</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> </table>	FUNDS:	AMOUNTS:	<input type="checkbox"/> General/Operating	\$ _____	<input type="checkbox"/> Home Improvement Fund	\$ _____	<input type="checkbox"/> Godparent Program/Tuition Assistance	\$ _____	Total from above		\$ _____	
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<input type="checkbox"/> General/Operating	\$ _____													
<input type="checkbox"/> Home Improvement Fund	\$ _____													
<input type="checkbox"/> Godparent Program/Tuition Assistance	\$ _____													
Total from above														
\$ _____														
CHECKING / SAVINGS	Please debit my donation from my (check one): <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (attach a voided check below)	Routing Number: _____ Valid Routing # must start with 0, 1, 2, or 3 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: _____												
CREDIT / DEBIT CARD	Card Brand (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card													
	Card Number: _____	Expiration Date: _____												
	Name on Card: _____													
	Billing Address (if different from above): _____													
	I authorize the above organization to process transactions in accordance with the information above.													
Signature (as it appears on the card): _____		Date: _____												

If using a checking account, please attach a voided check over the credit/debit card section above.

HAVE YOU CONSIDERED ELECTRONIC FUNDS TRANSFER FOR YOUR CONTRIBUTIONS TO LITTLE FLOWER PARISH?

As we issue annual statements, it is not uncommon for a few of our parishioners to discover that they perhaps did not give as they had intended over the past year.

Over the past several years, we have successfully implemented a program that allows parishioners to make their Sunday contribution to the parish automatically and electronically. A good number of parishioners have already taken advantage of this program, and all aspects of the program are going well. If you already participate in this program, thank you for your participation and generosity.

The program allows you to have withdrawals made weekly, semi-monthly, or monthly. **This program is very easy for the parish and for parishioners and helps us as givers to elevate the importance of our gift to God and parish and to stay current with our stewardship pledge. It helps us to assure that the commitment we make to our parish remains a priority.**

HERE ARE A FEW ADVANTAGES:

FOR OUR PARISHIONERS –

- NO NEED TO REMEMBER TO GRAB YOUR ENVELOPE AND CHECK BOOK OR WRITE CHECKS EVERY WEEK OR MONTH (EXCEPT FOR SPECIAL ENVELOPES AND SPECIAL COLLECTIONS)
- NO NEED TO WORRY ABOUT WHERE YOU ARE IN YOUR STEWARDSHIP COMMITMENT DUE TO TIMES WHEN YOU MAY BE AWAY FROM THE PARISH OR MAY HAVE FORGOTTEN YOUR ENVELOPE. YOU DECIDE ON THE AMOUNT AND THE FREQUENCY OF YOUR REGULAR DONATION AND THEN IT HAPPENS AUTOMATICALLY
- YOU MAY ALSO DONATE TO THE HOME IMPROVEMENT FUND OR THE GODPARENT PROGRAM ON A REGULAR BASIS THROUGH THE SAME PROCESS
- IF YOU PREFER, YOU MAY PLACE YOUR REGULARLY SCHEDULED CONTRIBUTION ON YOUR CREDIT CARD FOR PURPOSES OF CREDIT CARD REWARD PROGRAMS

FOR OUR PARISH –

- ALLOWS US TO HAVE A BETTER PROJECTION ON OUR CASH FLOW AND CASH WE CAN EXPECT TO HAVE ON HAND AT ANY GIVEN TIME.
- YOUR CONTRIBUTIONS DO NOT NEED TO BE HANDLED, THAT IS, COUNTED AND DEPOSITED.
- THE POSTING TO YOUR CONTRIBUTION RECORD AND GENERATION OF YOUR ANNUAL TAX STATEMENT IS MORE AUTOMATED AND VIRTUALLY EFFORTLESS

THIS PROGRAM IS COMPLETELY VOLUNTARY. IF YOU ARE INTERESTED, A PARTICIPATION FORM IS ON THE REVERSE SIDE. YOU MAY RETURN IT TO THE PARISH OFFICE VIA THE U.S. MAIL OR THE COLLECTION. PLEASE INCLUDE A VOIDED CHECK! THANKS FOR YOUR CONSIDERATION.