

## Authorization for Electronic Withdrawal Form

I authorize the Church of the Immaculate Conception, Rice, MN to initiate entries to my checking/savings account. This authority will remain in effect until I notify the Parish in writing to cancel it. Notification must be given two weeks in advance to cancel the transaction.

- Staple voided check here

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Name of Bank/Financial Institution

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Street Address

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City

State

Zip Code

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Name (Please Print)

Check one of the following boxes:

- Checking       Savings

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Monthly Total Authorized Dollar Amount

Effective Month to Begin

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Routing Number (9 Digit Number on the bottom of the check)

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Account Number

Check options for fund transfer dates:

\_\_\_\_\_ On Wednesday each week

\_\_\_\_\_ On the 1<sup>st</sup> of each month and or

\_\_\_\_\_ On the 15<sup>th</sup> of each month

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Signature of account holder

Date