

## 2022 AUTOMATIC WITHDRAWAL AUTHORIZATION AGREEMENT

I hereby authorize Saint Gabriel the Archangel to initiate electronic debit entries, and, if necessary, credit entries, to reverse erroneous debit entries to my account(s) listed below. It is agreed that these withdrawals will be made in accordance with the Rules of the National Automated Clearing House Association (NACHA).

Checking Account Amount

\$ \_\_\_\_\_ Account #\_\_\_\_

Savings Account Amount	\$	Account #
Credit Union Amount	\$	Account #
I choose to have my stew	ardship pledge	e deducted as follows*: (check one)
Weekly each	Friday	
Monthly (15 <sup>th</sup>	of month)	
Monthly (30 <sup>th</sup>	of month)	
Quarterly (M	arch 15 <sup>th</sup> , June	15 <sup>th</sup> , September 15 <sup>th</sup> & December 15 <sup>th</sup> )
		g) Please note: For NEW PARTICIPANTS, the annual deduction he beginning deduction date listed in the box below.
*	****IMPORTAN	T NEW & RENEWAL PARTICIPANTS*****
A VOIDED	CHECK MUST	BE ATTACHED FOR EACH CHECKING ACCOUNT.
A VOIDED DE	EPOSIT SLIP M	UST BE ATTACHED FOR EACH SAVINGS ACCOUNT.
NEW PARTICI	PANTS, PLE <i>E</i>	ASE COMPLETE THE FOLLOWING INFORMATION:
I/we are new particip	ants begin aut	comatic deductions on the following date
Nama		Date Signed
Name		Date Signed
Signature		Envelope #
		e charged on the day/ date you have indicated unless that day/date falls on a weekend

at the same amount, until written notice is given to St. Gabriel Parish to make changes.