

Contributions by Direct Payment (ACH Debit)-Authorization Form

Thank you for participating in electronic giving. Please provide the information below in order to make your regular Sunday contribution electronically. The second collections and Holy Days are listed separately. You may choose to give electronically for any of the extra collections by indicating so on the following pages.

Parishioner Name _____

Envelope # _____

Mailing Address _____

I hereby authorize **Holy Family Church-Auburn, NY** hereinafter called CHURCH, to initiate debit entries to my (our) Checking Account/Savings Account (circle one) indicated at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Depository Name _____

Branch _____

City _____

State _____

Zip _____

Routing # _____

Account # _____

Amount _____ **Sunday Collection**; (circle one) Weekly/Biweekly, Monthly

This authorization will remain in full force and in effect until CHURCH has received written notification from me (or either of us) of its termination in such manner as to afford CHURCH and DEPOSITORY a reasonable opportunity to act on it.

Name(s) _____

Please Print Clearly

Phone # _____

Date _____

Signature _____

NOTE: If any changes are made to the bank account information, please return this form along with a voided check or deposit slip to the parish office – attention: Lisa Camardo, Bookkeeper.

DIRECT PAYMENT SECOND COLLECTIONS

January - December 2016

Name: _____

Envelope # _____

Please fill in the amount, and initial next to any collection you would like to add to your Direct Payment Program:

Holy Days:

Solemnity of Mary, January 1, 2016

Amount \$ _____ Initials _____

Ash Wednesday, February 10, 2016

Amount \$ _____ Initials _____

Easter Flowers

Amount \$ _____ Initials _____

In memory of: _____

In honor of: _____

Easter, March 27, 2016

Amount \$ _____ Initials _____

Ascension Thursday, May 5, 2016

Amount \$ _____ Initials _____

All Saints Day, November 1, 2016

Amount \$ _____ Initials _____

All Souls Day, November 2, 2016

Amount \$ _____ Initials _____

Christmas Flowers

Amount \$ _____ Initials _____

In memory of: _____

In honor of: _____

Immaculate Conception, December 8, 2016

Amount \$ _____ Initials _____

Christmas Day, December 25, 2016

Amount \$ _____ Initials _____

Roof Renovation:

January 2016

Amount \$ _____ Initials _____

February 2016

Amount \$ _____ Initials _____

March 2016

Amount \$ _____ Initials _____

April 2016

Amount \$ _____ Initials _____

May 2016

Amount \$ _____ Initials _____

June 2016

Amount \$ _____ Initials _____

July 2016

Amount \$ _____ Initials _____

August 2016

Amount \$ _____ Initials _____

September 2016

Amount \$ _____ Initials _____

October 2016

Amount \$ _____ Initials _____

November 2016

Amount \$ _____ Initials _____

December 2016

Amount \$ _____ Initials _____

Help Defray Fuel & Heat Costs at Holy Family:

January 2016

Amount \$ _____ Initials _____

February 2016

Amount \$ _____ Initials _____

March 2016

Amount \$ _____ Initials _____

April 2016

Amount \$ _____ Initials _____

May 2016

Amount \$ _____ Initials _____

June 2016

Amount \$ _____ Initials _____

July 2016

Amount \$ _____ Initials _____

August 2016

Amount \$ _____ Initials _____

September 2016

Amount \$ _____ Initials _____

October 2016

Amount \$ _____ Initials _____

November 2016

Amount \$ _____ Initials _____

December 2016

Amount \$ _____ Initials _____

DIRECT PAYMENT SECOND COLLECTIONS

January - December 2016

Name: _____

Envelope # _____

Please fill in the amount, and initial next to any collection you would like to add to your Direct Payment Program:

Saint Joseph School Subsidy:

January 2016	Amount	\$	_____	Initials	_____
February 2016	Amount	\$	_____	Initials	_____
March 2016	Amount	\$	_____	Initials	_____
April 2016	Amount	\$	_____	Initials	_____
May 2016	Amount	\$	_____	Initials	_____
June 2016	Amount	\$	_____	Initials	_____
July 2016	Amount	\$	_____	Initials	_____
August 2016	Amount	\$	_____	Initials	_____
September 2016	Amount	\$	_____	Initials	_____
October 2016	Amount	\$	_____	Initials	_____
November 2016	Amount	\$	_____	Initials	_____
December 2016	Amount	\$	_____	Initials	_____

Diocesan Collections:

Black, Native American and Hispanic, February 14, 2016	Amount	\$	_____	Initials	_____
Catholic Relief Services, March 6, 2016	Amount	\$	_____	Initials	_____
Holy Land (Good Friday), March 25, 2016	Amount	\$	_____	Initials	_____
Catholic Home Missions Appeal, April 24, 2016	Amount	\$	_____	Initials	_____
Diocesan Missions Collection, May 15, 2016	Amount	\$	_____	Initials	_____
Catholic Communication Campaign, June 12, 2016	Amount	\$	_____	Initials	_____
Holy Father (Peter's Pence), June 26, 2016	Amount	\$	_____	Initials	_____
Emerging Churches, July 10, 2016	Amount	\$	_____	Initials	_____
Campaign for Human Development Appeal, September 18, 2016	Amount	\$	_____	Initials	_____
Mission Sunday, October 23, 2016	Amount	\$	_____	Initials	_____
Archdiocese for the Military Services, November 13, 2016	Amount	\$	_____	Initials	_____
Support of Catholic Univ. & other American Catholic Higher Education Inst., November 27, 2016	Amount	\$	_____	Initials	_____

This serves as authorization to deduct the above listed payments from the bank account I (we) currently have on file with Holy Family Church. The ACH payments listed above will be processed on the Monday following the date listed above.

Until further notice I no longer wish to receive envelopes

Date _____ **Initials** _____

Signature _____

Date _____

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Return to:
Lisa Camardo, Bookkeeper
Holy Family Church
85 North Street, Auburn, NY 13021

Any questions please call Lisa at 315-252-9576 or email at lcamardo@dor.org