

# Authorization For Electronic Transfer of Funds

# YES!

I/we would like  
to sign up for  
electronic giving!

I hereby authorize Holy Trinity Catholic Church of Lenexa to make electronic debit or credit entries and any necessary adjustments involving these entries in my account.

My Bank Name: \_\_\_\_\_ Beginning in (month): \_\_\_\_\_

Total Monthly Amount: \$ \_\_\_\_\_ Withdrawal Date: (select one) 5th 20th

Please apply the above amount as follows: \$ \_\_\_\_\_ Regular Offertory

\$ \_\_\_\_\_ Capital Campaign \$ \_\_\_\_\_ Other (please explain) \_\_\_\_\_

This authority is granted to Holy Trinity Church until it has received written notification from me of its termination in such time and manner as to afford Holy Trinity and its bank a reasonable opportunity to act.

Your Name (please print): \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

Please ATTACH A VOIDED CHECK from the appropriate account to this authorization card.

Do not use a deposit slip.  Check here if you do not wish to receive offertory envelopes.