

Christ the King Parish Authorization Agreement for Automated Giving

I, _____, hereby authorize **CHRIST THE KING PARISH**, 1400 Gerald Ave., Missoula, MT and **FIRST INTERSTATE BANK** to initiate debit entries to my Checking or Savings account indicated below and the depository named below to debit the same such amount.

The amount \$_____ will be deducted twice a month—on the 1st and 15th day of the month. (For example; a monthly donation of \$100.00 would be \$50.00 on the 1st and 15th of each month.)

Depository: Name _____
Address _____
City, State, Zip _____

Banking Transit-ABA #: _____
(always nine digits)

Bank Account Number: _____

(Attach to this form a voided check if checking account debit or a pre-printed savings deposit ticket if savings account.)

This authorization is to remain in full force effect until **Christ the King Parish** has received written notification at least ten business days in advance of the desired termination date.

(Authorized signature for above account) (Print Name) Date: _____

If second signature is required:

(Authorized signature for above account) (Print Name) Date: _____

_____ I understand that Christ the King Parish may initiate a reversal of any entry made under this agreement if an error has been made. I understand that the financial institution at which I have the above account is required to provide me with the procedures for resolving errors on entries made under this agreement. I understand that Christ the King will provide a written notice to me of the error within 24 hours.

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Cancellation of Automated Giving

I, _____, direct **CHRIST THE KING PARISH** to discontinue automatic debit entries to my bank account.

(Authorized signature for the parishioner bank account) (Print Name) Date: _____

(Only one signature is necessary to make this cancellation request)