AUTHORIZATION AGREEMENT
MONTHY PREAUTHORIZED PAYMENTS

Church name: **Church ID Number: 48-0805118**
Good Shepherd Catholic Church

I (We) hereby authorize Good Shepherd Catholic Church to initiate debit entries to my (our) Checking Account indicated below at the bank name below:

Bank Name:	**Branch**:
City:	**State**: **ZIP**
Transit/ABA No.:	**Account No**.:

This authority is to remain in full force and effect until GOOD SHEPHERD has received written notification from me (or either of us) of its termination in such time and in such manner as to afford GOOD SHEPHERD and BANK a reasonable opportunity to act on it.

Account Name: _____
{Please **print** account name. Indicate both names on joint accounts.)

Address: _____
Street Address City State ZIP

Signature: _____ **Signature** _____
Date: _____ **Date**: _____

Payments will be entered on the 1st or 15th of each month.
Please check your choice: _____ 1st of each month _____ 15th of each month

MONTHLY DEDUCTION: $ _____ ***Building Fund*** ___ ***Church Operations*** ___

Please include a voided check (or a copy) from your account with this form.

Christian stewardship helps us to become aware that God is the true source of the gifts we possess. These gifts must be shared and administered from our first fruits and not from what we might have left over.