
DEBIT DONATION

- ✓ It is easy and safe
- ✓ One simple step
- ✓ No more check writing
- ✓ Increase, decrease or discontinue your donation at any time
- ✓ Choose either weekly, semi-monthly or monthly deduction
- ✓ No more catching up with donations after vacations or absences
- ✓ End of year statements are sent to you as usual

How it works: Debit donation is an automatic deduction from your checking or savings account. It is a pre-authorized electronic fund transfer service and can only happen with your authorization. No one is allowed to deduct money from your account without your authorization. Your bank statement assures that your donation was made and serves as a reminder of your stewardship commitment.

To start: Fill out the back of this sheet, attach a voided check or saving account deposit slip and mail to the parish or drop off at the office. Contact the bookkeeper at 410-969-2784 if you have any questions. Thanks!

St. Bernadette Parish 801 Stevenson Road Severn, MD 21144
Parish Office: 410-969-2783 Business Office: 410-969-2784 Fax: 410-969-2789

04/01/10

DEBIT DONATION AUTHORIZATION FORM

St. Bernadette Parish

801 Stevenson Road

Severn, MD 21144

For Office Use Only: ES2117

Envelope #

Date

PARISHIONER AUTHORIZATION FORM

New Authorization

Change Contribution Amount

Change Contribution Date

Change Financial Institution Account

Discontinue Electronic Contribution

Name of Parishioner (Please Print)

Address

City

State

Zip

Phone #

CONTRIBUTION DESIGNATION

First Collection (Offertory)	\$ _____	Supports parish operations and ministries
Dorcas: Those In Need	\$ _____	Supports parishioners as well as NCEON, My Brother's Keeper and St. Gregory's
Capital Improvement	\$ _____	Capital projects
Designated Archdiocesan Charity	\$ _____	Supports Archdiocesan designated charities
Justice & Peace Sharing Fund	\$ _____	Supports parish designated charities
Shelter Assistance	\$ _____	Supports Fouse House, Habitat for Humanity, Winter Shelter and those temporarily displaced
Total Amount Per Contribution	\$ _____	

CONTRIBUTION FREQUENCY

- Weekly (Transferred on Mondays)
- Semimonthly (Transferred on the 1st & 15th)
- Monthly (Transferred on either the 1st or the 15th - CIRCLE ONE: 1ST or 15th)

Effective Date _____

Checking Account (attach a voided check)

Savings Account (attach a savings deposit slip)

Routing #: _____
Routing number must start with 0, 1, 2, or 3, is 9 digits long, and is located at bottom of check between these symbols □:□:

Account #: _____

I authorize **St. Bernadette Parish** and **Vanco Services, LLC** to process debit entries to my account. I have attached a voided check or savings deposit slip. This authority will remain in effect until I give written (7 days) notification to terminate this authorization.

Authorized signature on my account: _____

Date: _____

For NEW authorizations *only* please attach a voided check or savings deposit slip.