

Have you updated your tithing recently? Use this form to enroll or to change your current e-tithing.

St. Peter's Catholic Church

E-Tithing Enrollment Form

Monthly Offertory: \$ _____

*Month of first withdrawal _____

Monthly Debt

Reduction: \$ _____

*Month of first withdrawal same as Monthly Offertory

Monthly

St. Vincent de Paul: \$ _____

*Month of first withdrawal same as Monthly Offertory

Christmas Donation: \$ _____

*This additional amount will be debited in December

Easter Donation: \$ _____

*This additional amount will be debited in the month of Easter

Holy Days: \$ _____

*This amount will be divided between all Holy Days of obligation

*Month of withdrawal _____

Southern

Nebraska Register: \$ _____

*Annual cost: \$15

*Month of withdrawal _____

Authorization Agreement For Pre-Authorized (ACH) Payments

I (we) authorize St. Peter's Church to initiate debit entries to my (our) _____ checking/_____ savings account (select one) indicated below and the depository financial institution named below 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.

Checking or Savings Account Transfers

Name of Bank: _____

Name on Account: _____

9-digit Bank Routing #: _____

Bank Account #: _____

Please check one:

New Enrollment * Change my information * Terminate my account

Disclosures

This authority is to remain in full force and effect until St. Peter's Church has received written notification from me (or either of us) of its termination in such time and in such manner as to afford St. Peter's Church and Depository a reasonable opportunity to act on it. In no event shall it be effective with respect to entries processed by St. Peter's Church prior to receipt of notice of termination.

I (we) further authorized St. Peter's Church to initiate such credit entries to said account as may be necessary to correct any erroneous debit entries previously initiated thereto. I (we) authorize the Depository to accept and to credit or debit the amount of such entries to my (our) account. I (we) have the right to stop payment of any entry by notifying Depository prior to the posting of item to the account.

The undersigned hereby agrees that all entries initiated hereunder are to be governed in all respects by the Rules of the Mid-America Payment Exchange as now or hereafter in effect and agrees to be bound thereby.

X _____ X _____
Signature(s) of Account Holder(s)

Please attach a voided check.

Mail to St. Peter's Catholic Church, 4500 Duxhall Drive, Lincoln, Nebraska 68516
or place in Sunday's collection basket.