

EFT or Automatic Payment Form

If you are interested in having your contribution transferred automatically to St. Jude church without writing a personal check, please complete and return this form to the church office. Call 390-3520 if you have any questions.

Confidential consumer Authorization Agreement Pre-Arranged Payments (Debits)

(All information provided is only used to facilitate ACH debit transfers)

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS (ACH DEBITS)	
Donor Name _____	
I(We) hereby authorize St Jude Church Corporation hereinafter called COMPANY, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) Checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit and/or credit the same to such account.	
Bank Name _____	
City _____	State _____ Zip _____
Transit/ABA NO. _____	Account NO. _____
This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.	
Signature _____	Date _____
A voided check is required to start the deductions from your account	
Donation frequency is MONTHLY only, on the last weekday of each month.	

Donation breakdown:

Normal Contribution	_____
Capital Contribution	_____
Haiti Contribution	_____
Needy People Contribution	_____
Other (Designate)	_____
Total Contribution	_____

The debit authorization agreement contains the Customer's authorization to the Company to initiate debit entries to his/her/its account and to the receiving financial institution to accept any such entities initiated by the company and to debit them to such account. A voided check should be requested by the originator to verify financial institution and account numbers.

ATTACH A VOIDED CHECK TO THIS DOCUMENT