## - I would like to give my gift by automatic deduction -OR-- I already have automatic deduction, but would like to change the amount

I/We authorize my/our bank to pay Spiritus Christi Church the amount below according to the terms and conditions stated: Minimum weekly or monthly gift of \$5 required. Your gift will be automatically deducted on Mondays for weekly gifts or on the first day of the month for monthly gifts. Please attach a voided check from the account you wish to use. Transfers will begin in approximately two weeks.

REGULAR deduction:			
\$ Amount per WEEK OR \$ Amount per MONTH			
ADD deduction: \$ Amount per special collection (10 to 12 per year)			
I already have automatic deduction, but wish to <u>CHANGE TO</u> the above amounts.			
My authorization to charge my checking account at my bank shall be the same as if I had personally signed a check to Spiritus Christi Church. This authorization shall remain in effect until I notify Spiritus Christi Church or my bank in writing that I wish to end this agreement and my bank or Spiritus Christi Church has had reasonable time to act on it, or until Spiritus Christi Church or my bank has sent me 10 days written notice that they will end this agreement. A record of each charge will be included in my regular bank statement and will serve as my receipt.			

## AUTHORIZATION FOR DIRECT PAYMENT

I authorize:		
r ddiionze.	Spiritus Christi Church	
	(COMPANY NAME)	
	avings account. This authority will remain in effect until asonable opportunity to act on it. I can stop payment of a ed.	
(NAME OF FINANCIAL INSTITUTION)		(BRANCH)
(CITY)	(STATE)	(ZIP CODE)
(SIGNATURE)		(DATE)
	(NAME – PLEASE PRINT)	
	(ADDRESS – PLEASE PRINT)	
Account No.	Checking	or Savings
Financial Institution Routing Num	ber	
	(between these symbols : :::	on the bottom left of your check)