

Church of Our Lady of Victory

207 N Vine, Fergus Falls, Minnesota 56537

Automatic Payment Agreement Form

Automatic Contributions

An automatic contribution is a hassle free way to make your monthly contributions. Through an electronic service, your contributions are given to Our Lady of Victory once a month.

Convenience

To make this service easier, you can choose when your contribution will be drawn from your account. You pick the day that fits your budget the best and the contribution is made on that day.

Authorization Form

To authorize your bank to pay your church contributions from your checking or savings account, please send a VOIDED CHECK with this form to the Parish Office.

Authorization Agreement

I hereby authorize Our Lady of Victory to initiate automatic withdrawals from my account at the financial institution named below. I understand and approve that a detailed listing of contributions will be sent to me on an annual basis, and any adjustments will be made between me and the Church of Our Lady of Victory.

Further, I agree not to hold Our Lady of Victory responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in withdrawing funds from my account.

This agreement will remain in effect until Our Lady of Victory receives a written notice of cancellation from me or my financial institution, or until I submit a new direct payment form to the Parish Office.

My bank is hereby authorized to pay and charge my account for all Automatic Contributions against my account by Our Lady of Victory Church, in the amount of _____ per month.

Withdrawal date to be: _____ 1st Friday of each month _____ 2nd Friday of each month
_____ 3rd Friday of each month _____ 4th Friday of each month
_____ Weekly of each month (Friday)

Account Information

Name of Financial Institution: _____

Routing Number: _____

Checking

Savings

Account Number: _____

Signature

Authorized Signature (Primary): _____ Date: _____

Authorized Signature (Joint): _____ Date: _____

Please attach a voided check (checking) or deposit slip (savings) and return this form to Mayme Hofland in the Parish Office.