

ACH Authorization Form ~ Electronic Tithing
Cathedral of the Risen Christ Church – Lincoln, Nebraska



Effective Date: _____ Envelope #: _____
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In response to God's provision in my life, I establish this electronic fund transfer agreement to provide consistent financial support for His work through the ministry of Cathedral of the Risen Christ Church.

(Please Print) Name: _____

Address: _____ City _____, State _____ Zip _____

Daytime Telephone Number: _____ Evening Telephone Number: _____

Please complete information by each numbered item below. Thank you.

1 Contributor Authorization Form for (check one)

- New Authorization
- Change Contribution Amount
- Discontinue Electronic Giving
- Change Contribution Mode (weekly/monthly)
- Change Financial Institution

Name	Check #
Address	<input type="text"/>
VOID	
Memo	
: 987654321 : 12345678	Check #

2 I would like to contribute to Cathedral in the following way:

- Weekly tithe** (made on Wednesday of each week): \$ _____
- Monthly tithe** (made on the 15th of each month or next business day):
- Msgr. Tucker Cathedral School Endowment:** Monthly (made on the 15th of each month or next business day): \$ _____
- Education Support:** Monthly (made on the 15th of each month or next business day): \$ _____
- Maintenance Fund:** Monthly (made on the 15th of each month or next business day): \$ _____
- Southern Nebraska Register:** Annually (made on the 15th of February or next business day): \$15.00
- Easter Sunday:** (made Wednesday following Easter Sunday): \$ _____
- Christmas:** (made December 27th or next business day): \$ _____

Routing Number

Accounting Number

3 Please take my contribution directly from the account specified:

- Checking Account (attach a voided check)
- Saving Account (call church office @ 488-0948)

Routing Number: _____ Account Number: _____

(Please see diagram for help determining Routing & Account Numbers)

I hereby authorize Cathedral of the Risen Christ Church and Union Bank and Trust Company to initiate debit entries to my account. I have attached a voided check. This authority is to remain in full force and effect until Cathedral of the Risen Christ Church has received written notification from me (or either of us) of its termination in such time and manner as to afford Cathedral of the Risen Christ Church and Union Bank and Trust company opportunity to act on it. I (we) further authorize the Cathedral of the Risen Christ 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.

5 Authorization signature on my account: _____ Date: _____

**Please attach a
VOIDED check
HERE**