



Attn. Jerry Cohen
821 South Dale Mabry Highway
Tampa, FL 33609-4410
Phone: (813) 876-5841

AUTHORIZATION AGREEMENT FOR DEBIT DONATIONS

I/We hereby authorize Christ the King Church (**"The Church"**) to initiate a debit (withdrawal) from my/our
 Checking Account or **Savings Account**
indicated at the bank or financial institution named below (**"Depository"**).

I/We acknowledge the origination of Electronic (ACH) transactions to or from the account must comply with the provisions of U.S. law.

Please include a voided check or deposit slip.

GROWING IN STEWARDSHIP CAN BE AN EXCITING SPIRITUAL JOURNEY

- Weekly (Each Tuesday) Amount \$ _____
- Bi-Weekly (every other Tuesday) Amount \$ _____
- Monthly (2nd Tuesday of the month) Amount \$ _____

DEPOSITORY INFORMATION

Parishioner Bank Name _____

Bank Account # _____ Bank Routing # _____

CANCELLATION POLICY

This authorization is to remain in full force and effect until **The Church** has received written notification from me (or either of us) or termination in a time and manner that will allow **The Church** and **Depository** a reasonable opportunity to cancel.

Parishioner Name (please print) _____

Parishioner Signature _____

Parishioner Address _____

Parishioner email address _____ Phone # _____

Envelope/ID # _____ Date _____