



Parish Office 1221 N. 5th Street Chillicothe, IL 61523
309.274.3809 / info@sainted.org

ACH Recurring Payment Authorization Form

You may authorize regularly scheduled transfers from your checking or savings account. You will be charged the amount you indicate below according to the schedule you select.

Please complete the information below:

I _____ authorize **Saint Edward Church** to charge my bank account
(full name)
in the amount of \$ _____ per transfer according to the schedule selected below.

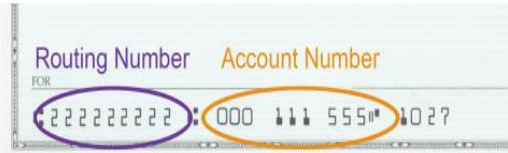
Select Schedule:

- Weekly: Every Monday
- Monthly: 1st of each month

Effective date: _____

Billing Address _____ Phone# _____
City, State, Zip _____ Email _____

Account Type: Checking Savings
Name on Acct _____
Bank Name _____
Account Number _____
Bank Routing # _____
Bank City/State _____



TO ENSURE ACCURACY, WE REQUEST THAT YOU PLEASE ATTACH A VOIDED CHECK WITH THIS SIGNED FORM.

SIGNATURE _____ DATE _____

I understand that this authorization will remain in effect until I cancel, and I agree to notify **St. Edward Church** in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next transfer date. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that **St. Edward Church** may at its discretion attempt to process the charge again within 30 days, and agree to an additional charge for each attempt to recover a returned NSF. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I agree not to dispute this recurring transfer with my bank so long as the transactions correspond to the terms indicated in this authorization form.

These accounts remain subject to their individual terms and conditions, which are not modified by this authorization. If a transfer is made from a savings account, you retain the right to require not less than 7 days written notice of withdrawal.