

Immaculate Conception Catholic Church Stewardship Commitment Form 2018

“Do not forget to do good and to share with others, for with such sacrifices God is pleased.” - Hebrews 13:16

Name: _____ Phone: _____

Email: _____

Address: _____

Street Address *City* *State* *Zip*

I choose to give: \$10.00 \$25.00 \$50.00 \$100.00 \$250.00 \$_____

weekly monthly

Please apply as: Regular Sunday Collection \$_____ Major Maint. Res. \$_____

If blank contribution defaults to Regular Sunday Collection IC School Support \$_____ Chiapas \$_____ Haiti \$_____

This contribution to the support of my Parish will be in:

Cash or Check -----> Please use your envelopes

Direct deposit from my bank account --> Please complete the e-tithing section

For New Enrollees or Current Participants with account changes

Please provide requested info and read and sign form below.

For automatic bank draft, check one: Checking Account Savings Account

Please follow the contribution instructions above. I understand that weekly contributions will occur on or after the following Tuesday, and monthly contributions will occur on or after the 5th day of the month.

Financial Institution: _____

Location of Financial Institution: _____
City *State* *Zip*

Information on your account: _____
Routing Number *Account Number*

In addition, please attach a blank voided check or deposit slip.

For automatic bank draft: I hereby authorize Immaculate Conception Church to initiate electronic debit entries to the account indicated above and the Financial Institution named above to debit same to such account. I acknowledge that the origination of ACH transactions to this account must comply with the provisions of U.S. law. In the event an incorrect debit is made, I authorize credit entries to correct errors made to this account.

This authorization is to remain in force until Immaculate Conception Church receives written notification from me of its termination in such time and in such manner as to afford Immaculate Conception Church a reasonable opportunity to act on it.

Name (Print)

Signature

Date

Charged to my credit card ----->

Please visit our website www.immaconception.org
Click on Welcome to Online Giving, click on Create New Account.
You manage and control your contributions on your schedule.