

AUTHORIZATION FOR DIRECT PAYMENT

STAPLE VOIDED
CHECK HERE

I authorize Most Holy Redeemer Church and the financial institution named
(COMPANY NAME)

below to initiate electronic entries from my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged.

Frandsen Bank & Trust

(NAME OF FINANCIAL INSTITUTION)

Montgomery

(BRANCH)

Montgomery

(CITY)

Minnesota

(STATE)

56069

(ZIP CODE)

(SIGNATURE)

(DATE)

(NAME - PLEASE PRINT)

(ADDRESS - PLEASE PRINT)

Account Number _____

Checking ☐

Savings ☐

Financial Institution Routing Number _____

On _____, I authorized
(DATE)

Most Holy Redeemer Parish

(COMPANY NAME)

206 Vine Ave W Montgomery, MN 56069

(ADDRESS)

507 364-7981

(PHONE)

to debit my account described below. This authority will remain in effect until I notify them in writing to cancel it in such time as to afford the church a reasonable opportunity to act on it. I can stop payment of any entry by notifying the financial institution 3 days before my account is charged.

Regular payment amount: \$ _____

Regular payment date (circle one choice) 15th of each month (12) Weekly (52)