## **AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS**

## Most Blessed Sacrament Parish Offertory Collection

I/We hereby authorize Most Blessed Sacrament Parish to initiate debit entries to my/our checking or savings account at the bank/depository named below.

BANK DEPOSITORY NAME:	
CITY:	STATE:ZIP:
TRANSIT/ABA NR:  These numbers will be fille	ACCOUNT NR:ed in by MBS using your voided check.
Debits to be made on the following basis:	
☐ Twice per Month (1 <sup>st</sup> and	15 <sup>th</sup> ) Payment Amount \$
This authority is to remain in full force and effect until Most Blessed Sacrament Parish and my BANK/DEPOSITORY have received written notification from me (my spouse) of its termination in such time and in such manner as to afford Most Blessed Sacrament Parish and my BANK/DEPOSITORY a reasonable opportunity to act on it.	
NAME(S):	MBS ENV. NR:
DATE: SIGN	NED:
Remember to enclose a blank, <u>voided</u> check!	