

**PLEDGE MONTHLY  
AUTHORIZATION AGREEMENT  
FOR PREAUTHORIZED PAYMENTS**

COMPANY NAME: St. John the Baptist Catholic Church

I (we) hereby authorize St. John the Baptist Catholic Church, hereinafter called COMPANY, to initiate debit entries to my (our) [  ] Checking [  ] Savings account (select one) on the first \_\_\_\_; second \_\_\_\_; third \_\_\_\_; fourth \_\_\_\_ Monday of the month \$ \_\_\_\_\_(monthly amount), indicated below and the depository named below, hereinafter called DEPOSITORY, to debit same to such account.

**If checking account please attach a voided check.**

DEPOSITORY NAME \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TRANSIT/ABA NO. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ACCOUNT NO. \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY has received written notification (within time frame) from me (or either of us) of its termination in such time and in such manner as to afford COMPANY a reasonable opportunity to act on it. If joint account must have both names and signatures)

NAME \_\_\_\_\_ NAME \_\_\_\_\_  
Please print Please print

SIGNED \_\_\_\_\_ SIGNED \_\_\_\_\_

DATE \_\_\_\_\_ DATE \_\_\_\_\_

Phone # \_\_\_\_\_ e:mail \_\_\_\_\_