SAINT ANN CATHOLIC CHURCH & OUR LADY OF THE ASSUMPTION MISSION
PARISHSOFT LLC
PAYMENT AUTHORIZATION FORM

Church, School, or Diocese Name (Please check parish or mission)	☐**Saint Ann Catholic Church** ☐ **Our Lady of the Assumption Mission**
Name on account (Print)	Account Holder's Phone #
Address	
City, State, and Zip	
I authorize the following:	❒ New Payment from Account Specified Below *(Choose either bank or credit card. One account only, please.)* ❒ Change Indicated Below ❒ Discontinue Electronic Funds Transfer from Account or Fund Specified Below.

Account Information
(Choose either Bank or Credit Card. Provide information below for one account only.)

Bank Account Information		**Credit Card Information**	
Bank Name		Credit Card Type ❒ Mastercard ❒ Visa	❒ American Express ❒ Discover ❒ Other *(provide type below)* _____
Account Type	❒ Checking *(please attach voided check)* ❒ Savings *(please attach deposit slip)*		
Routing Number		Credit Card #	
Account Number		Credit Card Expiration Date	
Authorization Effective Date / /		Authorization Effective Date / /	

Contribution Schedule

Fund Type *(e.g., Sunday Offering,DSA Pledge, etc.)*	**Payment Schedule**	**Amount**	**Payment Start Date**	**Collection Date** *(Choose date for withdrawal from your account))*	**Down Payment** *(if applicable)*
Sunday Offering	❒ Monthly ❒ Quarterly ❒ Semi-annually *(2x/year)* ❒ One Time	$		❒ 5th ❒ 20th ❒ None	$
Catholic Sharing Appeal	❒ Monthly ❒ Quarterly ❒ Semi-annually *(2x/year)* ❒ One Time	$		❒ 5th ❒ 20th ❒ None	$
Building Pledge	❒ Monthly ❒ Quarterly ❒ Semi-annually *(2x/year)* ❒ One Time	$		❒ 5th ❒ 20th ❒ None	$
Discovery School Tuition	❒ Monthly	$		❒ 1st	$

I authorize the above-named church or school to debit from the account specified on this form. This authorization will remain in effect until I give reasonable change or cancellation notice to terminate authorization. I understand there will be a $15 nonsufficient funds (NSF) fee charged to my account for NSF debits.

Authorized account signature:_____ Date:_____

For checking or savings account debits, please attach your voided check or savings deposit slip.