

“Direct Giving”

Direct Giving Authorization Agreement for Contributions to Gesu Parish.

I (we) hereby authorize Gesu Church to instruct my (our) financial institution to initiate withdrawals from my (our) account listed below. I understand that I control my contributions and if at any time I decide to discontinue this service, I will notify Gesu Church. Withdrawals will be made the following business day if the 1st or the 16th falls on a non-business day.

My Financial Institution: _____

Type of Account: _____ Checking _____ Savings

Routing Number: _____

Account Number: _____

Withdrawal:

_____ 1st of each Month _____ 16th of each month _____ Both

\$_____ Amount each time

Print Name (s) _____

Signature (s) _____

Date: _____

Phone Number: _____

Important – Please attach a voided check

_____ Check here if you would like a copy of this agreement.