



## SACRED HEART CATHOLIC CHURCH POLONIA, WISCONSIN

### *Finance Council*

January, 2018

Sacred Heart Parish offers all parishioners the opportunity for you to set up automatic deposits of your weekly/monthly church contributions. (ACH Direct Debit). Many churches are using direct debit already and parishioners find this to be a convenient, safe and efficient method of handling their parish support.

#### How it works:

You select your contribution schedule – either weekly or monthly – and your contribution \$ amount. . Based upon your selected schedule, your contribution will be automatically transferred from your checking or savings account and electronically deposited into the Parish's checking account via the Automated Clearing House {ACH}. Each offering will be noted on your bank statement. You will save the cost of checks and possible bank service fees. In addition, you will no longer have to write checks and fill out offering envelopes. There is no cost to you for this service.

#### How to Enroll:

Complete the authorization form (located on the backside of this letter or online at [www.sacredheartpolonia.com](http://www.sacredheartpolonia.com)). Once we receive the completed form at the Parish Office (along with a voided check or deposit ticket), the process will begin for the automatic transfer of your offering from your designated account to the Parish account. It does not matter where you bank, the automatic deposit of your offering can be set up with any financial institution located in the U.S. **IMPORTANT:** Some banks (not all) may have separate routing numbers for their checking accounts and savings accounts. **IF SUBMITTING INFORMATION FOR A SAVINGS ACCOUNT, PLEASE BE SURE TO CONFIRM THE ROUTING NUMBER WITH YOUR BANK.**

#### How to Stop or Change the ACH:

- To stop your contributions, using the authorization form, select the "Discontinue Electronic Funds Transfer" option and submit the signed form to the Parish Office.
- To update your banking information, again using the authorization form, select the "Change Indicated Below" option and submit the signed form to the Parish Office.

Please prayerfully consider this convenient offering option. As you can see, enrollment is fairly quick and easy. If you decide you would like to sign up for this service, please complete the authorization form. You can sign up...or discontinue...at any time - or continue to make your contributions through the collection basket as you have in the past.

Please note, if you would like to continue making additional "special offerings" such as Holy Days, Special Needs, Flower Offerings, etc., these offerings can still be made through the collection basket.

If you have any questions, please contact the Parish Office.



**Sacred Heart Parish**  
 7375 Church Street  
 Custer, WI 54423  
 (715) 592-4221  
 parishoffice@sacredheartpolonia.com

**PAYMENT AUTHORIZATION FORM (ACH)**

Church Name: **Sacred Heart Parish**

Name on Account (please print): \_\_\_\_\_ Account Holder's Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_

I authorize the Following:

New Payments from Account Specified below

Change Indicated Below

Discontinue Electronic Funds Transfers from my Account Effective:

Your Parish Envelope Number: \_\_\_\_\_

**Bank Account Information (use a separate Form for each account)**

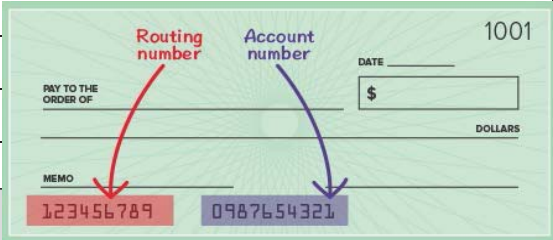
Bank Name: \_\_\_\_\_

Account Type:  Checking (attach voided check)  Savings (attach deposit slip)

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Authorization Effective Date: \_\_\_\_\_



**Contribution Schedule (select one)**

- Weekly Contribution (Every Monday)  
 Amount: \$ \_\_\_\_\_  
 Contribution Start Date: \_\_\_\_\_
- Monthly Contribution (On the 5<sup>th</sup> of Each Month)  
 Amount: \$ \_\_\_\_\_  
 Contribution Start Date: \_\_\_\_\_

I/we authorize Sacred Heart Church to debit from the account specified on this form. This authorization will remain in effect until I/we give written change or cancellation notice to terminate authorization. I/we understand there will be a **\$10.00** nonsufficient funds (NSF) fee charged to my/our account for NSF debits.

Authorized Account Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Account Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return completed form to the Sacred Heart Parish Office. For your own security, do not e-mail.**