



St. Ann Parish
320 N. Harrison St.
Stoughton, WI 53589

Electronic Funds Transfer Approval Form (EFT)

Offertory collection

I hereby authorize St. Ann Parish to Charge my: **Checking** or **Savings** (circle one)

From Bank Name: _____

Routing number _____ Account number _____
(This is the number on the far left on the bottom of your check) (This is the number in the middle on the bottom of your check)

Credit St. Ann's **General Account** beginning _____ in the amount of \$ _____
(Start date)

Please transfer funds thereafter, until further notice: (circle one)

Semi-monthly (1st and 15th of the month) **Monthly** (Circle either the 1st, or the 15th)

Building Maintenance Fund Collection

I hereby authorize St. Ann Parish to Charge my: **Checking** or **Savings** (circle one)

From Bank Name: _____

Routing number _____ Account number _____
(This is the number on the far left on the bottom of your check) (This is the number in the middle on the bottom of your check)

Credit St. Ann's **Building Maintenance Fund** beginning _____ in the amount of \$ _____
(Start date)

Please transfer funds thereafter, until further notice: (circle one)

Semi-monthly (1st and 15th of the month) **Monthly** (Circle either the 1st or the 15th)

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Signature: _____ Date: _____

Phone #: _____ Envelope # _____

**Please include a copy of a voided blank check, or savings account deposit slip.
(Not necessary if just changing the amount)**

Give this form to the parish office and we will co-ordinate with your bank.

EFT questions and answers are on the reverse side of this form 10/12